

H. G. RUSSELL

MEDICAL ECONOMICS

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MAGAZINE
of the ~ ~
MEDICAL
PROFESSION

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MEDICAL ECONOMICS

September
1929

The Business Magazine of the Medical Profession

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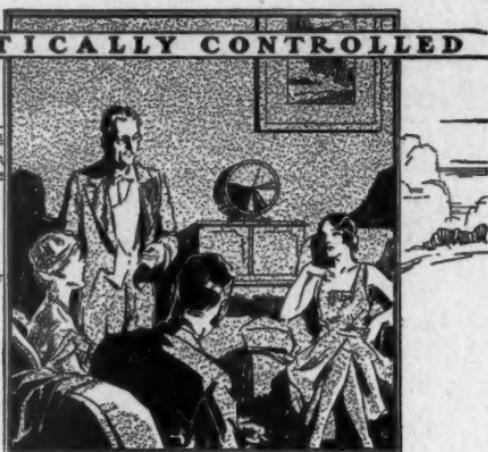
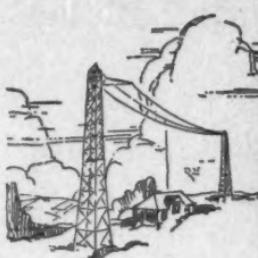
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PERHAPS a certain cynicism prompted Henri de Mondeville to advise 13th century physicians, "Never dine with a patient who is in your debt, but get your dinner at an inn, otherwise he will deduct his hospitality from your fee." Possibly the canny physician spoke from experience. Indeed, he was famous for his rapacity in extracting the last gold piece from his patients.

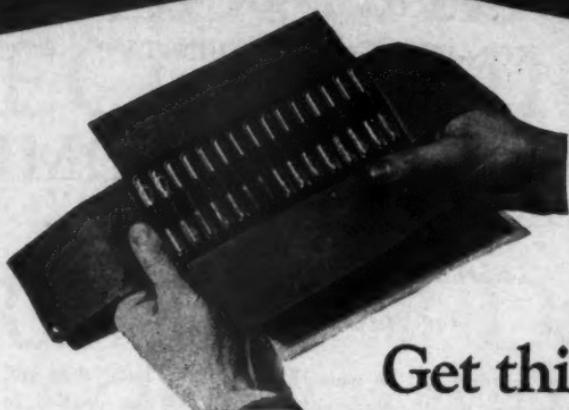
But de Mondeville earned a more important place in medical history than could come from any stand on collections alone. In an age of mysticism and of medical theories amounting to downright superstition, he is known for the sound common sense of his practice. His contemporaries adhered slavishly to the "salve surgery" surviving from the time of Galen. They thought to force nature by devious means. Ascribed to suppuration some benign influence out of all proportion to its true nature.

Reversing the practice of his colleagues, de Mondeville sought to aid nature instead of forcing her hand at every turn. He was innocent as to the cause of suppuration, but he regarded it as an unnecessary evil. By keeping wounds clean he succeeded in preventing this unwholesome condition. He brought his patients back to health more speedily than members of the old school.

The old school was too strongly

intrenched for his theory of simple cleanliness to take hold. Six centuries passed. 19th century microscopes bombarded the medical world with facts to supplant traditional theories. The victory for surgical cleanliness was hardly come by, but the blind groping of the 13th century has become the gospel of 20th century surgery. Upon the foundation of asepsis urged by de Mondeville has been built a structure that goes far beyond his simple aims.

In modern surgery simple cleanliness is not enough. Asepsis must be complete, certain. Agents of unquestioned germicidal power are essential. They must be effective against bacteria without injury to tissue or danger to human life. An antiseptic of signal success in meeting these exacting demands is Zonite. This electrolytically prepared solution of sodium hypochlorite is thoroughly stable. Its chlorine content is practically constant at 9.00 to 10.00 grammes per litre, assuring a phenol coefficient of over 3. Zonite is always ready for use, and readily adaptable to a variety of techniques. The physician is quick to appreciate the advantages of its non-toxic and non-irritant properties which enable him to employ it without fear of damage to tissue or danger to human life. May we send you a bottle of Zonite and descriptive literature? Zonite Products Corporation, 250 Park Avenue, New York, N. Y.



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Natural Body Defenses Are Not Interfered With

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MEDICAL ECONOMICS

September
1929

The Business Magazine of the Medical Profession

This is Volume 6, No. 12

Editorial Offices: Rutherford, N. J.

REASONS ^{Why the} Doctor Goes UNPAID

"Though God cures the patient, the doctor gets the fee," Spanish Proverb. Modern American addition: "Perhaps"

By John Myerson

THE remarkable development of the pay-on-the-installment plan in America has been discussed pro and con by economists and financial men. One side says that the condition is unsound and that spending next year's income rather than that of last year must inevitably result in financial disaster for great numbers of people, as well as for business firms who have sold their products in that way.

On the other hand, it has been argued, the use of the installment plan has so increased the buying power of our nation that it has created a market for the goods which the rapidly growing manufacturing facilities are turning out in such enormous quantities, and thus furnishes employment and prosperity for the whole country.

Time will tell, but one thing is certain: *There is one class on whom this custom has worked a hardship and that class is the professional men.*

In the general improvement of

methods, especially in the accounting, financial and credit conduct of the average business in America, which has taken place in the last quarter century, the professional classes have in some degree shared. But the effect on them has been almost negligible in comparison with that effected in the office of the merchant. The "business of medicine" has lagged behind to an alarming degree.

Nowhere in the many discussions of the subject in the professional or popular journals, or in the press, have I seen expressed the view of the man who is between the doctor and the patient, when a "go-between" is necessary.

It has been my fortune for some time to have interviewed many thousands of patients in connection with a financing plan for professional accounts, and I am enumerating below some of the reasons for the great percentage of loss to the medical and dental men. *These I have placed in the order*



WHY THE DOCTOR GOES UNPAID: . . . "His patients are under a continual bombardment of selling effort. Advertising is every place they turn and is now even coming from the formerly empty air to assail their ears."

of their frequency as nearly as my experience will indicate:

1. Unemployment or irregular employment. The man with a steady job even at a moderate wage has usually learned by necessity or inclination to cut his coat according to his cloth. Unless the sum for professional services is exceptionally large, he takes care of it from his margin above actual living expenses.

The man who is employed intermittently, as for example in the building trades, has often not experience or business judgment enough to regulate his outlays in times of good earning so that he may have a sufficient reserve to carry him through slack periods; like the Indian, he is too free a spender when hunting is good and trusts to luck to get through the lean times without an empty belly.

If the doctor's charges come during the flush time they are paid, but if as so often happens, the lack of proper living that goes with the slack times brings sick-

ness and debts, then the doctor has to wait. In so many industries there are unexpected layoffs, or slack periods of unusual length, causing the workers to get behind. A few months of idleness may put the family so far in arrears that it takes years to overcome this condition.

2. Lack of a good business-like arrangement in regard to payment. We, the laymen, have been trained for generations to consider the doctor's bill as something different from other commercial obligations. The size of his fee has been left for the doctor to fix arbitrarily and then thought of as something to be paid in indefinite amounts in the vague future.

Many physicians have had no consistent method of sending bills; some bill in 30 days, some in 60, some in 6 months, some take a day off and send bills once a year and some, never.

Is it any wonder that many patients do not take seriously an obligation to which the doctor, the

most vitally interested party, is indifferent?

Worse than that, plenty of medical men seem to discourage the idea that they be paid. Several of my acquaintances have to be actually dunned to give a patient a statement of the amount owing for services rendered.

This may sound extreme, but I have known of repeated cases where a patient, delinquent for years, under the urging of a collector has agreed to make definite payments on specified dates if the doctor wished it, to be told on reference to the doctor that "There was no hurry."

Can you imagine what, in, say, five years from today, would be the financial position of a mercantile firm with ample capital,

which would adopt such a policy? Would you buy its common stock on the market now?

3. Serious or continued sickness cutting off the income or piling up the charges for hospital and professional services so high that it is just impossible for the family of limited earning capacity to meet them. I have run across many families where people of middle life have had the savings of a thrifty lifetime wiped out, and have been forced to start all over again, not merely without anything, but actually so in debt that their whole future was mortgaged.

Usually these people have undertaken treatment in the belief that they could pay for it and so have not sought charity, but it

WHY THE DOCTOR GOES UNPAID: "In so many industries there are unexpected layoffs, or slack periods of unusual length, causing the worker to get behind."

Photo by Ewing Galloway



is just the luck of the game for them and for their doctors, that those bills cannot be paid.

4. "Deadbeats". There is always a percentage of people who just do not intend to pay anything that they can avoid. Physicians, having no universal organized credit reporting system, have hardly any check against such persons and *they know it!*

Often members of this class, because of their record, have about given up trying to get credit from merchants but consider the dentists and physicians "easy marks". To add insult to injury, the "dead-beats" commonly demand and get extra attention because, since they expect never to pay for it, the best is none too good.

5. High fees, or exorbitant fees; no uniformity in charges or even an approximation of such. It may be argued that people buy high-priced cars and clothes, but here the buyer can see a decided difference either in appearance or in service given. To the patient the examination given by the general practitioner usually seems the same as that given by the specialist; moreover he is supposed to be paying for expert advice in the case of the latter, and often this advice is contradicted

by another specialist, just as high-priced.

The following is a typical case: Mr. X had three girls; two fell sick and died within two weeks and the third was in critical condition. The family physician, as the case was puzzling, suggested consultation. Two physicians of long experience and high reputation and two specialists were called. The girl died. The charges of the doctors were, in the above order, nothing, ten dollars, twenty-five dollars, and seventy-five dollars. Mr. X paid the first three and fifty dollars to the fourth, and refused to pay more; he could not see that the value given to himself by the last in comparison with the others was as seventy-five to nothing, or to ten, or twenty-five.

6. We often hear: "The Doctor did not help me. Why should I pay for something I did not get? I went for help. If I repair a customer's auto and it does not run any better, I don't get paid." There is a measure of justice in this if there is a lack of a definite understanding beforehand, between the patient and doctor.

7. As minor causes there are a number of reasons for non-
(Turn to Page 105)



WHY THE DOCTOR GOES UNPAID: "It takes more moral fiber than many people possess to resist . . . hunger for articles which should be untouched luxuries until their debt to the doctor is paid."

Photo by
Ewing Galloway

The home of the author in Apia, in the Samoan Islands, where he practised for eight years. (In circle) Dr. Braucht.



Practice *in* the South Seas

"I feel that there are many semi-civilized customs that civilization would do well to adopt."

Frederick E. Braucht, M. D.

Elkader, Iowa

THE most grateful patient I have ever known was a woman who knew nothing of medical centers, who had never seen the inside of a real hospital and who had never been encumbered by the momentous decision of deciding between a country practitioner and a city specialist.

She was a native of Apia, in the Samoan Islands, where it was the pleasure of my young wife and me, shortly after my graduation in 1895, to spend the happiest eight years in our memory. This good woman, for whom I had removed a 70-pound papillomatous ovarian carcinoma of the right side, came to our front veranda every Christmas morning for six years, bearing a modest but richly esteemed present.

To get there she had to travel one hundred and fifty miles by land and sea. By land, most of her journey was made on foot. The fee she had paid me was insignificant but never have I felt more fully rewarded for a

surgical operation. Where is there a woman in the civilized world who would travel 150 miles every Christmas for six years to offer her surgeon a token of her gratitude? From many it is difficult to collect even a moderate fee, to say nothing of such heart-spoken appreciation. How much longer my Samoan patient would have continued to bring her Christmas offering I can not say, as I came away from the island.

But I can say that during those eight years of practice among a native people, so called semi-civilized, I received the greatest respect and the kindest consideration of any place in which I have ever practiced.

There were about 50,000 people for whom I did all the surgery and a large part of the medical practice. After the first six months, the surgery began. From that time until I left, we were operating from one to three times a week, and had from one to three major cases every operating



The Pitcairn Island girl, who held office as nurse for the author in Samoa.

day. With no conveniences, no trained help except my wife, no other doctor, who could be called upon to assist, and an improvised operating table, we began hopefully.

The first serious operation I undertook was a sixty pound elephanstical scrotum. This was a condition I had never seen before, and knew nothing about how to proceed to remove it. Anyway, it came off to the great satisfaction of the natives, but I considered it a very poor job, as I had not succeeded in getting away all the pathological tissue.

Later I worked out on oper-

ation that I do not believe can be improved upon. It provides for the quick removal of all the pathological tissue and leaves the man in a normal condition. (The modis operandi of this operation may be found in the Journal A. M. A. 1898.) After a time a local cabinet maker built me an operating table, according to specifications I furnished. We imported other conveniences from San Francisco and Sidney.

Much of the time our hospital, capacity fifteen beds, was overflowing, and the patients found shelter in the neighboring native homes. The Europeans were taken care of in our house, which was a hospital and dwelling combined, the native hospital being a detached ward. We often had as many as twenty-five surgical cases under our care at one time, which ranged from fractured skulls to amputation of digits.

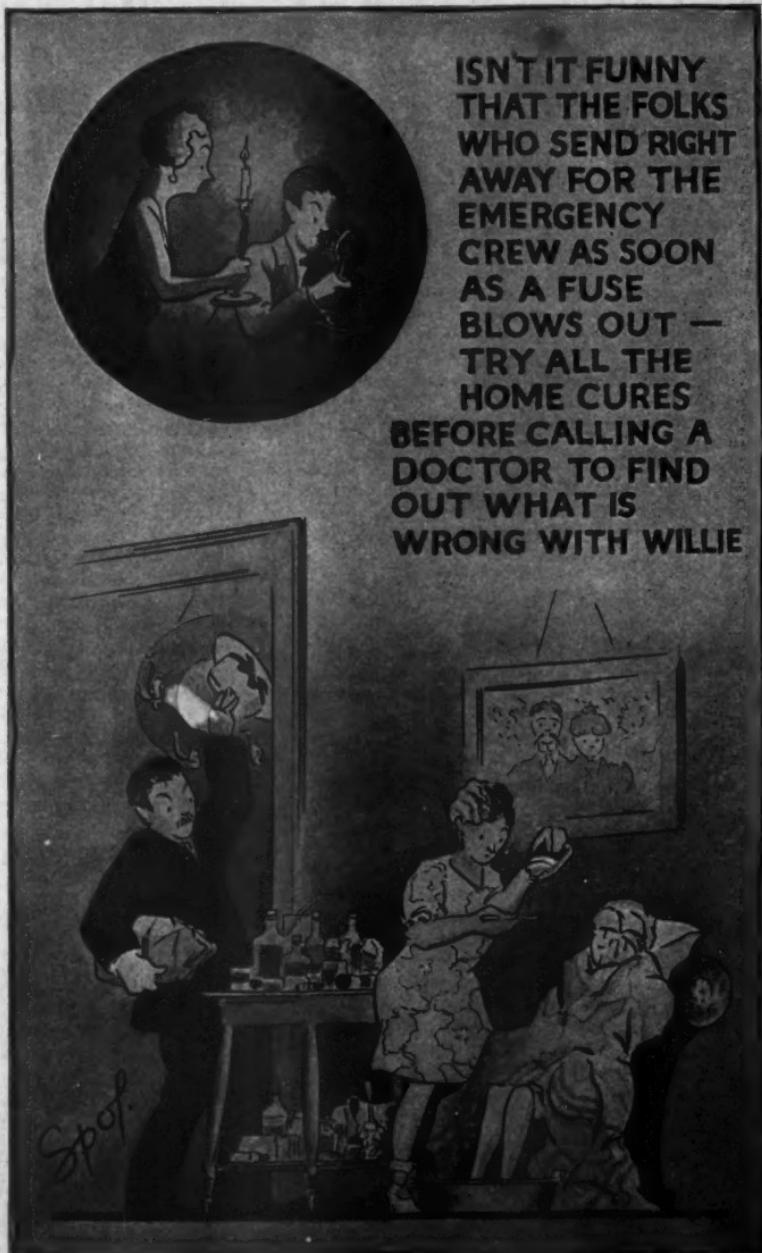
The operations embraced lifting fractured skull fragments and spicula, mastoidectomies, plastic surgery on almost severed noses, lips, and ears, made by heavy knives in village fights, catching up arteries and veins severed by sharks' teeth, and sewing up wounds from the same cause. They included removal of lipoma, and dermoid cysts, extirpation of a fibroid from the mouth, chest stabs and gun shot wounds, obstetrical operations too numerous to mention, and the removal of

(Turn to Page 55)



Here are the sort of patients who "would never call a doctor at night, unless they thought it a case of life or death."

It's an odd thing about medicine!



ISN'T IT FUNNY
THAT THE FOLKS
WHO SEND RIGHT
AWAY FOR THE
EMERGENCY
CREW AS SOON
AS A FUSE
BLOWS OUT —
TRY ALL THE
HOME CURES
BEFORE CALLING A
DOCTOR TO FIND
OUT WHAT IS
WRONG WITH WILLIE

[For a copy of this cartoon on cardboard]
[write to Medical Economics, Rutherford, N. J.]

GONE-- and Just About

IN the good old days, when all titles had aliases, this article would have undoubtedly been headed, "As the Doctor's Wife Sees It, or a Plea for the Adjustment of Perspective on the Part of Members of the Medical Profession." They wrote titles that way a good many years ago. Before my time, of course.

But either way, the idea seeking expression, the question needing an answer, would be the same.

One of Webster's definitions for the word "perspective" is "the glass through which an object is viewed." Isn't there something wrong with the glass through which a man views life so that all the things which give life meaning for a normal man are subordinated to his work?

There might be room for argument among physicians themselves as to whether this is the case, but there would be none among their wives. They may

wonder whether the doctor's attitude toward life is the result of a carefully thought out plan of procedure, in which sacrifice is balanced against achievement, or whether it is a following of the lines of least resistance.

But they can nevertheless see what the doctor is perhaps too close to his own work to see, that the work itself overshadows the meaning of the work.

Ask the average business man why he goes to work every day, and nine times out of ten he will reply, "Because my family's welfare and happiness depend on it."

Ask the average physician why he devotes any required—or requested—part of the twenty-four hours to his work, leaving himself no stated time for rest and recreation, depriving himself of family joys, and his family of the pleasure of his companionship, working enthusiastically or doggedly as the case may be, devoting his energy to the earning of that



"A silent and an absent-minded host they are, with no heart whatever for St. Peter's genial welcome."

FORGOTTEN!

Pointing out a little moral
that every good doctor
learns eventually
—but most often
too late

By Florence Aird

which is to guarantee the welfare and happiness of those dependent upon him, and, practically always, utterly neglecting to harvest the fruit of his labors!

Ask him why he does all this, and see if he doesn't have to scratch his head awhile before he answers.

It is a rash man who will say that he works for the good of humanity when he has a wife and family dependent on him. There are other things besides charity that should begin at home, if there is a home.

So admitting that the physician's activities are undertaken primarily for the purpose of providing the necessities, comforts, and pleasures of life for his family, including himself, how much progress is he making when those same activities defeat the end aimed at?

When he feels that he must work every minute in order to provide for his family, and yet is too busy working, to attend to the collecting that is to do the providing for the family?

The trouble with the average physician—though I realize that I'd better put up a protective



smoke screen before I say it—is that he takes himself too seriously. Now wait a minute! I don't mean at all what you think I do.

Let's imagine St. Peter organizing an excursion back to this vale of tears, for deceased doctors who have been hanging around the inside of the pearly gates in the hope of hearing from the incoming multitudes some news of how the world they left behind them is managing to get along without their services.

We hear the flapping of many wings as the doctors, off on twenty-four hours furlough, scurry for their respective late earthly abodes, fully persuaded that the far away droning of automobiles is the groaning of the clientele they left behind, and that the silvery sheet of water shining beneath them in the rays of the sun, is the river of their late patients' tears.

Every twenty-four hours must come to an end sooner or later. So next we see St. Peter, with a knowing twinkle in his eye, throwing wide the pearly gates to the returned medical men, who plainly have something on their

(Turn to Page 77)

Everybody's . .

A LOT of people talk about this or that being "our greatest problem." The fact is we have so many vital questions to decide that one must be very wise in order to determine which of them is most pressing and important. The manufacturer sees urgent need for new and better machines; the economist regards as most essential the elimination of the business cycle and the stabilization of gold; others stress the menace of unemployment, gang rule, unbridled speculation, installment buying, over-production, preventable fires, huge world trusts, dietetic ignorance and prohibition.

We are told to look out or the insects will starve us. Propaganda must be restricted. The wheels of traffic must be unlocked. Preaching must be improved. All defectives must be sterilized. Provision must be made at once for the threat of a rapidly increasing population. Our records must be kept on

paper that will resist the ravages of time.

We are warned of the mockery of American divorce, the heavy cost of the common cold to life and industry, the curse of wasted leisure, the seriousness of failing metal supplies, the sorry plight of the efficient farmer, the crime of an unchecked petroleum production, the dilemma of the middle-aged man out of a job, the growing power of company unions, sharp practices in newspaperdom and the foolish passion for volume.

And all that I have here set forth represents no more than a mere scratching on the broad surface of the subject of current problems. Since human nature changes with painful slowness, it follows that our difficulties multiply as industry expands and population increases. All new and important inventions immediately affect old and established lines of enterprise. The movies and the radio have become a menace to the book publishing companies.

"We talk about supplying our bodies with a proper diet, but not much is said about a diet for our minds. . . ."

\$1000⁰⁰ REWARD
IF YOU CAN LOCATE JOSEPHINE DOUBLE-BODIED GIRL
APPEARING IN PERSON ALIVE

Photo by Ewing Galloway



Business

By Floyd W.
Parsons

[Propaganda's dangerous half-truths!]



" . . . half-truths
are being employed
to exploit the weaknesses
of human nature."

Some even question whether radio is not more of a curse than a blessing. They say the radio has become hardly more than a signboard erected in the living-room to bring us news of marvelous vacuum sweepers, mechanical refrigerators and automobile tires that won't puncture. They say that the radio, through advertising, has been dedicated to that great idol—Dollar Democracy.

Doubtless this point of view is somewhat exaggerated, but it does provide food for thought. We are so prone to push success beyond the peak of safety—so quick to run to extremes in commercializing a clever idea. That is why many believe that advertising has become detrimental to the public life in its use of propaganda. They recognize that advertising carried on honestly and with strict regard for accuracy in its legitimate field is beneficial.

This is proved by the fact that notwithstanding the present huge expenditure of a billion dollars a year by advertisers, the result is that the public pays less for articles of higher quality. It is the condition created by advertising that has speeded up scientific

investigation bringing great improvements in products.

The history of advertising has shown that lying does not pay; that this merchandising agent is the servant, not the master of the public; that it costs the consumer nothing; renders mass production possible and provides all the savings created by a standardized civilization.

Advertising, of course, has in full measure the weaknesses and dangers inherent in the land where it operates, but it has no substitute, as is evidenced by the fact that business has been unable to find a less costly and less wasteful method of distributing information.

But the case for propaganda is not so clear cut or favorable. The aim of many propagandists is to "put something over" by presenting only a part of the facts. Few people appreciate how greatly propaganda now influences the words, actions and thoughts of a large portion of our population.

Even the expressed ideas of many eminent leaders are dictated by designing publicists operating behind the scenes. All
(Turn to Page 73)

"Speaking FRANKLY"

Phone

To the Editor:
It may interest
Rose Strong (author of that
article about the telephone
bureau, in July MEDICAL ECO-
NOMICS) and you that I have had
no telephone for going on ten
years. I find life much pleasan-
ter. And I am in practice too,
you bet. The telephone company
is far more worried about it than
I am.

A. L. M.

Filed

To the Editor:
Every number
of MEDICAL ECONOMICS is read,
re-read, card-indexed, and filed.
A very helpful and entertaining
publication.

L. E. W.

Square

To the Editor:
I am led to
comment on the letter from a
Massachusetts physician published
in July, and to repeat his
question: "Why can't we have
better cooperation?"

Without boasting, I try to play
the game square. When one of
my colleagues left town for six
weeks and did not leave a single
case in my care, several of his
patients came to me during his
absence. As soon as he returned,
however, I at once told his pa-
tients he was back and turned
them over to him. To look at
it fairly, there was no real reason
why this doctor's patients should
continue with me because they
had to get someone else in their
own doctor's absence.

I have yet to meet a physician
who willingly releases a patient
whom he feels capable of car-
ing for if the patient has money.
Any cases referred to me are ones
that the referring doctor is un-
able to handle, and incidentally,
if he gets in on one of my reg-
ulars, he cinches him firmly, if
possible.

I believe we would all do better

if we could be a little less graft-
ing and cooperate more faithfully.

M. R.

Statements

To the Editor:
Several times
I have been on the point of writ-
ing you my views of the "coun-
try doctor" and his troubles, but
have thought that since I am a
comparative infant in the pro-
fession others would know much
more about it than I.

Others have expressed the view
that the rural doctor is used in
an emergency, but where possi-
ble the patient goes to the city.
That is true with some but not
with all.

This is the only incorporated
town, save one, within a radius
of fifteen miles, although there
are many towns within that.

When I came here less than
two years ago and expressed my
intention, to a doctor in a neigh-
boring town, of sending state-
ments each month he immediately
tried to dissuade me. "You'll
make them mad," he said. But

Awake

To the Editor:
May I offer my
unsolicited opinion in re-
gard to Medical Economics.
I believe that in its own
field Medical Economics has
done more good towards
awakening the medical pro-
fession than any other Jour-
nal that has been published
in the last decade.

If you will note the pro-
ceedings of the American
Medical Association at their
last session in Portland,
medical economics certainly
came in for its part on the
program. They even went
so far as to appoint a spe-
cial committee to make in-

. . . what the readers think

I did it nevertheless and so far have failed to find one who took offense. However, I have learned that statements for the most part, are a waste of time, stationery and stamps. They don't bring in the accounts, although I still continue to mail them.

In this community personal appeal is the only reasonably sure way of getting the money. Hence, where I think the money is in I take a half day and go out to collect. Sometimes I have just a more or less pleasant ride and sometimes it is really profitable.

I can call to mind several cases to whom I have sent two or more statements and written several letters without a response; then when I went to see them I didn't have to even ask for the account.

Of course, the natural conclusion is that I have trained them to expect me when I need the money, but someone else did that—not me. And I have had to live and pay my expenses out of my income.

I'd like to see something in your

vestigations in medical economics for the next year or two. Five years ago you very seldom saw, or even heard of an article on this very important subject. At the present time it is a topic of every-day discussion.

In my opinion Medical Economics is certainly due part of the credit for this advancement. The Editor and the Staff are certainly to be congratulated on publishing such a practical, common sense, and I must say, much needed publication. May she live long and wax fat.

W. H. KENNER, M. D.

magazine from some of the other youngsters.

C. J. M.

Cartoon

To the Editor: The cartoon in July MEDICAL ECONOMICS is the cleverest I have seen in a long time and should be hung in every physician's office, for the benefit of these charity workers. They come into our office, see a long line of patients waiting (most of them charity) and take it for granted that we should double our donation.

Many thanks to the artist who drew the cartoon, from the writer who has for fifteen years been secretary to a physician and can appreciate the situation.

I thoroughly enjoy MEDICAL ECONOMICS and feel that many articles in it have helped me. I might add that a great deal of useful suggestions are given for physicians. If only they would profit by them. But my fifteen years as secretary has taught me that as a rule physicians think too little of the financial side of practice. They give, and give, and give, of themselves, of their time, and of their money. They die early, leaving a legacy of two-thirds of life's earnings in uncollected accounts. Even so, the general public does not half appreciate their doctors.

MRS. F. L.

Bureau

To the Editor: I have repeatedly seen articles in MEDICAL ECONOMICS about collecting bills. The fact is, when people have no money all efforts to get money are in vain. The only solution I can see is to have them provide money, and then we shall be able to keep the good-will of our patients.

My plan is as follows: Let every physician collect cash if

(Turn to Page 49)

"MEDICAL ECONOMICS" --

An Editorial by K Sheridan Barketel

ON page 30 of this issue is a letter from a physician giving MEDICAL ECONOMICS a large share of the credit for the action of the A. M. A. at its Portland convention, in appointing a special committee to make an investigation into the subject of medical economics.

"Five years ago," says this doctor (if I may be pardoned for waving the bouquet a little) "you very seldom saw, or even heard of an article on this very important subject. At the present time it is a topic of everyday discussion. In my opinion, MEDICAL ECONOMICS is certainly due part of the credit for this advancement."

It would be a foolish gesture for me either to deny or affirm the truth of such a kindly intended testimonial to the usefulness of MEDICAL ECONOMICS. I should not care to be accused, like Caesar, of refusing laurels with the back of my hand, nor should I wish to be guilty of claiming credit wherever it lies.

MY real purpose in bringing up this subject is to assure those few readers who may still be afraid that their motive in discussing medical economics, *the topic*, and in perusing MEDICAL ECONOMICS, *the publication*, will be misunderstood—that their fears are quite groundless. Medical economics as a topic for conversation in polite medical circles is today entirely *au fait*.

Whether credit is due MEDICAL ECONOMICS, *the publication*, for the present-day rational attitude toward medical economics, *the topic*; or whether MEDICAL ECONOMICS, *the publication*, should give humble thanks to this new attitude for its six years of healthy existence—is beside the point.

It is very much like the question of which came first, the egg or the chicken. The results are the same in either case, and so long as the medical profession continues to hatch eggs like the A. M. A.'s new committee on medical

the publication ^{and} _{the} topic

economics, we need not be concerned over the question as to whom is to be awarded the credit for their origin.

And plenty of *oeufs* are being hatched. The very considerable activity taking place locally throughout the country is highly interesting to watch. County medical societies in Chicago and New York are hard at work on this solution of problems with which physicians individually have struggled for many weary years. Hardly a day goes by that we do not learn of some new undertaking, or hear of some new line of progress.

I quote from a letter revealing what the medical association in an eastern city is doing: ". . . A Committee of five was appointed and authorized to select from various branches of the profession five representative men to consider, as you term it, the *Economic Destiny of the Medical Profession*, and report at subsequent meetings.

"Some of the subjects selected to report on are—relations between specialists and between general practitioners and specialists, corporation physicians and surgeons, medical ethics of 1929, hospital and dispensary abuses, health department activities, collections, deadbeats, advertising to the public by proprietary manufacturers, the chain drug store, health talks in the daily press, and so on. The report of the Committee of Five is due in the October meeting. It suffices to say that MEDICAL ECONOMICS will come in for a big share of the credit in the preliminary report."

AND suffice it also to say that we are grateful for the opportunity that is ours to give circulation to discussions on the economics of medicine. That, we know, is a useful function, and it is the only function we are ambitious to fill. MEDICAL ECONOMICS has never had any desire to promulgate revolutionary ideas, nor to bombard its readers with propaganda in favor of sudden and radical changes. Least of all does it stand for *any* lowering of medical ethics or of medical standards, be they in education, ideals, or practice.

Open discussion and repetition of ideas present in the minds of the majority makes progress. Improvement in the physician's economic, social and professional status constitutes the credo of MEDICAL ECONOMICS.

George Dorsey (below) wrote "Why We Behave Like Human Beings."



Sadie Thompson, somewhat tarnished heroine of "Rain," sprang from the brain of Somerset Maugham (below).



These photographs are reproduced through the courtesy of AMERICAN DRUG-GIST.

Warwick Deeping (above) is the author of "Sorrell & Son".

DOCTORS Who

They've forsaken medicine and are better known

Both an author and a playwright is Harold Dearden (above, right), who turned out "A Wonderful Adventure" and "Interference"; Henry C. Rowland (below, right) looks the part of a physician even though "The Peddler" did turn him into an author.



Sherlock Holmes and Dr. Watson would never have become legends but for Sir Arthur Conan Doyle, who once practiced in South Africa.

Write Books

for the field of literature
as authors than M. D.s

Francis Brett Young (below, left) said he could never have written "Love Is Enough" without having first studied medicine; A. S. M. Hutchinson (below, center) owes his fame to the best-sellers—"If Winter Comes" and "This Freedom."

Henry Pulsford (above, left) wrote "The Old Brig's Cargo" to amuse his sons.



Critics of Arthur Schnitzler believe that he did better practicing medicine in Vienna than in writing such books as "Casanova's Homecoming".



Building

[Where it is always
the night before
Christmas]

By Howard L.
Updegraff, M. D.

Hollywood,

Calif.

IT is said that all good Americans go to Paris before they die. And eventually so do all good medicos go to California, either in body or spirit. At least every doctor's household echoes the thought occasionally of the day when moving to sunnier climes will be a reality rather than a wish.

Such a desire had been mine for years when fate turned the cards and I found myself in Hollywood with the problem of building myself an office suitable for a Reconstructive Surgeon.

Twenty-five years ago, Hollywood was a mainstreet with one drug-store, one restaurant, a movie studio and orange groves where the fruit, like calves-liver before prohibition, was to be had

for the asking. Consequently the town today—a bustling city of 150,000 souls, saved and unsaved, is blessed with practically all new office buildings and more springing up daily to the right and to the left—the riveters volleying and thundering.

A unique city, halfway between Los Angeles and the sea—on the car and bus lines. It lies serenely snuggled up against the hills, whose canyons and skylines each day view the erection of some invading easterner's Castle in Spain. Offices consequently can boast of a year-round view unequalled, and even brought near at hand by one's own roof-garden opening off the private office.

Standing on the corner of Hollywood Boulevard and Highland

an OFFICE in Hollywood

Avenue one fine day, where everyone who travels passes once in a lifetime, I saw the girder-skeleton of a new bank building against the sky and was soon in conference with Mr. John Clauss, the energetic building manager.

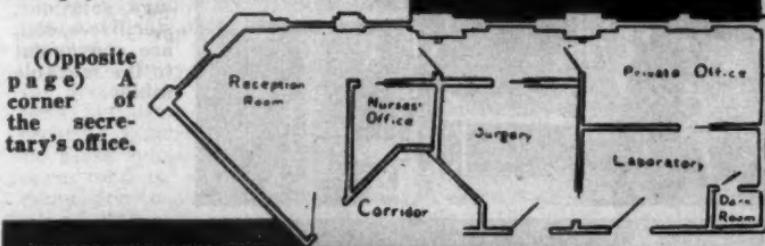
Rents averaged \$2.80 per square foot. The cost of placing and erecting partitions not already in the building plan was \$11.00 per floor foot. The architects, along with the building management were ready and willing on the submittal of a rough sketch to work out a preliminary blueprint and give an estimate on the cost of a complete building installation, including partitions, wood-work, plumbing, wiring, painting, hardware, etc.

Also that on a five year lease, if office fixtures were of their installation, they would accept a half payment down and the other

half in sixty monthly payments. Electricity, gas, water, heat, compressed air, janitor service, and twenty-four hour elevator serv-



(Opposite page) A corner of the secretary's office.



(Above) The reception room, showing modernistic table, lamp, chair, and block print drapes; and a floor plan of the suite.

(At left) The consultation room, walled with Philipino mahogany.

MEDICAL ECONOMICS

ice seven days a week in this building were included in the lease.

The office rental problem depended of course, on the amount of space desired. The Chamber of Commerce figures showed that an average of 89% of available office space in Hollywood was rented, in spite of the constant increase of building. This further impressed on me the necessity of taking advantage of the opportunity of building an office in a new building while under construction so that I might pay only for the building in and not tearing out.

Again a preferable type of

building proved to be one located not only on a strategic corner but one with some distinguishing architectural feature, such as a tower illuminated at night. I found California as expressed by Hollywood Boulevard to be a myriad riot of colored lights and flood lighted buildings inspired no doubt by the tourist-traveled streets at night.

I have not seen the statistics on the amount of gas used in the Neon signs at night, but imagine it would equal the amount used in extolling the average epic of the screen.

**The skeleton of the building I
(Turn to Page 109)**



A corner of the surgery for minor cases. Surgical dressings, solutions, sterilizers, etc., are convenient to the movable table.



Another view of the reception room. The Venetian blinds are stained to match the paneling. The table holds a metal vase filled with flowers. More illustrations to this article appear on page 34.

Photos reproduced through the courtesy of the author.

"Er-Have I Seen You Before?"

A true incident of a physician who kept records
but was too busy to use them

By Hall Johnston

This is the first in a series of experiences, observed by a layman-writer, which show how things sometimes look from the patient's point of view. If you don't mind having morals pointed out in an interesting manner, follow this series. The stories will appear from time to time, as space allows.

WHAT impression do your patients receive when they enter your office? What do they think about while they are in your waiting room? How do your office girl, your nurse, your professional assistants and associates impress them? *What do they think of you?*

If your practice is fully established, these things may not appear to be of vital importance, for in that event, if anything has impeded your progress you have hurdled it.

But to the young practitioner, the doctor who is anxious to extend his usefulness to ever increasing numbers, in the answer to these questions may lie the open road to success or a condemnation to slow progress or to near-failure.

I hope that I shall not be misunderstood, for I believe that a doctor, to succeed, must first be a good doctor. But even a good doctor must have patients, and to have them he must get them over that first hazard, namely a decision to submit their cases to him. *Only then does he have an opportunity to prove his skill.*

In a series of articles, I shall try to show from actual experiences as reported to me by both physicians and patients, just how certain practices tend to control the volume of business flowing through the physician's office. It is my hope that many readers may be able to eliminate prac-

tices that have been instrumental in driving good patients away, and, on the other hand, adopt those which have a tendency to induce patients to return for further medical service.

While I may have something to say about the use of modern equipment and its advantages, it will also be my purpose to show how your present office and equipment may be better used, suggesting a desired finesse ensemble as to equipment, office arrangement, and office personnel. This, of course, includes the physician himself—the personal equation which so vitally affects his business success.

What I shall say in these articles will concern both old and new patients, giving first attention to the latter, since the established patient is less likely to be influenced by office routine. Since they are to be based on actual experiences, we will take a particular patient, a lady, and follow her into the doctor's office.

This patient was a farm girl who married a city boy. She had never been sick, and her experience with doctors was limited to a rather intimate acquaintance with the family physician who officiated at her birth. Presently, for a similar duty, it became necessary to engage a physician, and at the suggestion of a friend, a very busy member of a hospital staff was selected.

(Turn to Page 52)

WHEN TONIC LIGHT BATHS ARE NEEDED . . .



*Safety is
your Greatest
Concern*

THE ALPINE HOME MODEL SUN LAMP—
*Safe . . . convenient . . . compact . . . No
sputtering. No fumes or sparks.*

THE originators of ultra-violet ray equipment for use by the medical profession were the scientists of the Hanovia Chemical Company.

Today there are more than 150,000 Hanovia Lamps in use by physicians all over the world—convincing proof that the integrity of the Hanovia product has been kept intact, striking evidence of the wide professional endorsement they enjoy.

But following upon the adaptation of ultra-violet ray equipment for home use, a tremendous vogue for suntan resulted. The counters of drug stores quickly became crowded with various styles of "health lamps."

Some of these do not produce ultra-violet rays—many do not even claim to—others produce only a negligible amount of ultra-violet.

A safe lamp for the layman

The Hanovia Company was interested in perfecting a home model lamp which could be used safely

and effectively by the layman. The Home Model Alpine Sun Lamp resulted. It produces ultra-violet rays in the proper quantity for tonic effects only—its output of rays has been carefully planned, carefully checked by experts in this new field of science.

The Hanovia Company feels that the medical profession can recommend the Home Model Lamp to their patients with complete confidence. In our message to the public we are constantly stressing the importance of consulting a physician, and we recognize fully the dangers of self diagnosis.

We would enjoy sending you copies of the literature that is prepared for the public. May we do that?



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Why Not Contingent Fees?

Let us take a lesson from the legal profession and make semi-charity fees contingent upon future prosperity

By Vernon A. Chapman, M. D.

HERE can be no question that economics is becoming more than ever an insistent note in the life of the physician or surgeon. The situation of today demands that the professional man abandon the time-honored idea that he must give no thought to insuring the necessary pecuniary reward for his professional services.

The practice of medicine today demands a heavier investment than ever in the past. The rising prosperity of the nation demands that the physician's family be well taken care, not only while the head of the family lives but after he dies. And in the event that he does not oblige the community by dying at an early age from over-work, there must be provisions for old age and consequent disability.

The doctor of yesterday not only had to struggle with the physical ills of his patients but also had to share very largely in their financial ills, be they acute or chronic, acquired or inherited. It was not enough that the physician induced premature grey hair in his endeavors to relieve the patient of his physical ills and deficiencies, but he also, much of the time, had to pay himself for such work.

Out of what? Very often out of Neighbor Smith's free-will offering of potatoes; sometimes out of Neighbor Jones' bumper crop of corn; and once in a while out of Neighbor Martin's generosity with a fresh batch of blueberry pie!

The schoolmaster, the physician, the preacher, ministered to the mental, physical and the moral needs of the community

and all three were paid in similar measure. There was, of course, this difference in the services rendered: the mental and moral ills very rarely, if ever, took on the acuteness or severity that the physical ills were wont to do. The doctor may therefore be said to have carried a slightly heavier burden than the others, and of the three he would probably be the

"I do not mean that a millstone should be hung about the neck of any strugger, but neither do I mean for such patients, when their financial status has risen, to waft their surplus dollars into the lap of the first dealer in luxuries they happen to encounter—all thought of doctor vanished."

first to notice grey hairs in the mirror.

But he worked and was contented, for he felt a quaint, naive confidence that his community would protect him from want.

Conditions of today are not, in general, like that. The country is on a high level of prosperity and the class known as worker hardly knows the meaning of poverty. It is not necessary to go into detail about the proportion of radios, automobiles and other modern luxuries per unit of population. The obvious thing is the unfairness of expecting the physician, in the midst

of all this prosperity, still to bear the burden of medical charity.

It is certainly neither misanthropic nor even socialistic on the part of the physician to expect the community to care for its own needy sick. The logical deduction from all this is that the private patient should be a paying patient—or, let us say, either a paying or semi-charity patient.

And it is here that I should like clearly to bring out the idea that the semi-charity patient should be placed in a position where he will acutely and chronically remember that he owes to the doctor something which he should pay, eventually if not now.

I do not mean that a millstone should be hung about the neck of any struggler, but neither do I mean for such patients, when their financial status has risen, to waft their surplus dollars into the lap of the first dealer in luxuries they happen to encounter, all thought of doctor vanished.

It would seem that the medical profession could learn something from the methods of the legal profession. Instead of writing "dis-

count to balance" on the patient's bill, an inscription like "balance of payment deferred" might well take the place of it.

The development of a *contingent fee* or *deferred payment* plan into a standard practice, recognized throughout the profession, might well be the solution of the border-line charity case.

The doctor who supplies a vital need in time of distress to an eventually successful individual certainly holds a share in the later success, just as materially as he would had he invested money or services in the eventual success of a corporation.

Even if these deferred dividends have no cash value they serve to retain a moral obligation, a healthy sense of value, in the mind of the patient who is too prone to forget.

But cash value they should have! Especially in the case of disability or lowered straits of the physician himself, the deferred dividends should be in cash that will provide food, clothing, and want to the physical body while alive, rather than glow to the soul in the Hereafter.

The Mortgaged Crop

Reported by Lawyer Hayward

IN March, 1926, a Washington doctor was pressing a delinquent patient for payment of his overdue account.

"I have a year's lease on the Buckley farm, and I'll give you a chattel mortgage on the wheat that I will sow in the fall of 1926 and harvest of 1927," the patient proposed. The mortgage was duly signed, and the patient "summer fallowed" the land, but, before the wheat was sown, the landlord demanded payment of his lease.

"I can't pay, but I'll give you a release of my lease, and you can lease to somebody who will pay," the patient suggested. The

release was duly signed, the landlord leased the land to B, B sowed in the fall of 1926, and was preparing the harvest in 1927 when the doctor was heard from.

"I hold a chattel mortgage on the crops sown in 1926," the doctor contended, and sued B for the value of the crops.

In ruling that the doctor's chattel mortgage did not apply to the crops, the Wisconsin Supreme Court said:

"It must be borne in mind that, while the mortgage is valid from its date, it does not attach until the thing that is mortgaged has come into being. For instance, if no crop is sown, there is nothing that the mortgage can attach to, for the summer-fallow is not part of the crop."





When children have coryza watch the middle ear

Most cases of otitis media in children result from extension of a common cold or the coryza associated with influenza or the exanthemata. Unless the primary inflammation in the rhinopharynx is treated vigorously, there is always the danger that the infection may travel through the Eustachian tube and into the middle ear cavity.

Pediatricians and otologists alike urge the necessity of watching the middle ear in all cases of coryza in children. By advising frequent nasal instillations of a light oily solution containing menthol, eucalyptol, camphor and chlorbutinol — Mistol — it is believed that many cases of otitis media can be prevented or even checked in their beginning.

The use of Mistol is effective



treatment for all conditions of nasal congestion. Its anticongestive and stimulating ingredients are contained in a light oil possessing the most favorable properties for spreading on and clinging to the nasal mucosa, so that the preparation reaches every part and is not readily washed away by accumulated secretions.

Mistol assures greater comfort for little coryza patients and also protection for their ears. It may be diluted one-half with Nujol, for infants, and proportionately for children.

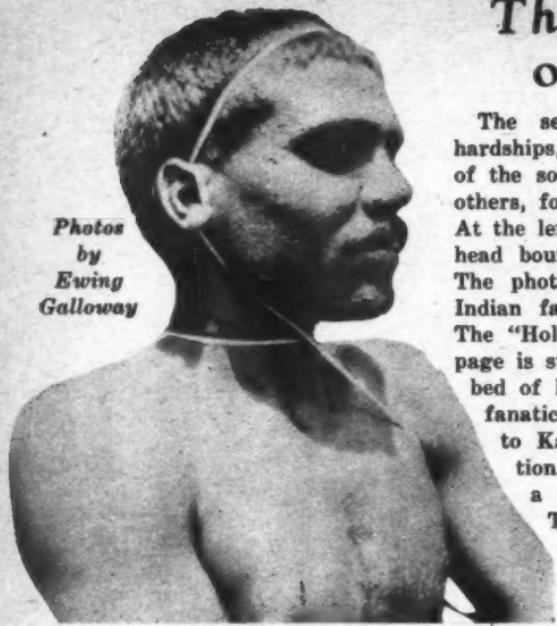
Mistol

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MADE BY THE MAKERS OF NUJOL

*Every advertisement for Mistol in the medical press is written by a registered physician.





Photos
by
Ewing
Galloway

The Ecstasy of PAIN

The self-infliction of physical hardships, whether for purification of the soul, or for amusement of others, forms an Art all its own. At the left is a Hindu ascetic, his head bound in an erect position. The photograph below shows an Indian fakir reclining on spikes. The "Holy Man" on the opposite page is suspending himself over a bed of hot coals; beside him a fanatic lashes himself in tribute to Kali, Goddess of Destruction. The lower photo is of a street vaudeville act in Tunis.





DOCTOR—

*Be sure to write "BEN-GAY,"
when you want to prescribe —*

BAUME BENGUÉ

ANALGÉSIQUE Pronounced BEN GAY

The original French Analgesic Balm, and
the one specified by leading physicians
for over thirty-five years.

FOR
INSECT
BITES



FOR
TIRED
FEET



Indispensable for all muscular aches and pains, lumbago, headache, head and chest colds, myalgia, pains of muscular rheumatism, etc.

THOS. LEEMING & CO., Inc.
101 West 31st Street, New York City

I shall be pleased to receive gratis triple samples of "BEN-GAY", the original French Analgesic Balm.

M. D.





Handicap or HELP?

Sketching briefly the character of a man who did not allow a deformity to thwart his desire to learn medicine

By Henrie Murrell

MOUNTON, Iowa, a small town in the Big Corn State, is home to a man who has been inspiration to many who have walked its streets. The man, Dr. W. L. Downing, is a physician who was handicapped by the congenital absence of the three middle fingers of the right hand. Naturally his left hand became his mainstay, but he has forced the other to help him to success. His mental attitude has been that he was favored two fingers beyond the unfortunate few, rather than deprived three commonly given.

He educated himself without appreciable financial backing, and he established for himself an enviable local reputation in medicine and surgery. Yet even that seems a small part of what he has accomplished in his sixty-seven years of life. He stands today, just as he has for many of his forty years resident practice of medicine there, a typical small-town luminary.

Tall, slender, almost frail-looking, studious and retiring, gentle, ever professional in manner, and unusually precise in speech, this man has weaved a happy influence about himself. Home and church, profession and civic endeavors, have like a shuttle, subtly spun him to the hearts of his townspeople and friends. You feel a sorrow touching him, but see a victory.

In childhood, he felt his deformity keenly, what sensitive child wouldn't? But finally he began to view his affliction philosophically, and realized early in life that if he was ever to "climb over it" he had to "begin right now."

He applied himself to the best of his ability whenever given an opportunity to learn. Medicine had always fascinated him. Having discovered a way to secure an education consistent with his limited means, he took up the study of his chosen profession, with Dr. S. H. Sawyer and his son, Dr. J. L. Sawyer, at Unionville Iowa, as his preceptors.

For a time the young man acted as janitor, slept in the office,

"...If the advice of a man who has been over the road is worth anything to others situated similarly, it is this: 'don't hold back! Do it, whatever your brain and ambition inspires you to do. Succeed in spite of any physical handicap.'"

taught in the Unionville Public Schools six hours daily, studied medicine before and after school and often rode with his preceptor all night, going to school in the morning, more frequently than not, without his breakfast.

In harvest time he worked on Dr. Sawyer's farm to pay his tuition fee of \$50 yearly. He spent two years with Dr. S. H. Sawyer, of whom Dr. Downing says there was no better in his time, and two in college, graduating from Rush College, Chicago, in 1886. In March, 1890, he took up residence at Moulton and has practiced there ever since.

(Turn to Page 97)



The Public, the Dentist and Kolynos

KOLYNOS
TO THE
PUBLIC

No. 1

LIVE, ANTISEPTIC FOAM.

"The live and antiseptic Kolynos foam spreads itself all over the teeth and throughout the mouth. It dissolves and washes away the mucoid coating on teeth that makes them look yellow and dingy. It cleans teeth down to the gleaming, white, naked enamel without injury."

"The foam pushes its way into all the crevices between the teeth. It cleans out and disinfects all those places where food particles lodge and decay. It stimulates the gums and combats tartar. It destroys germs and mouth acids, and makes the whole mouth sweet, clean and refreshed."

THE DENTIST who knows Kolynos as an ally of scientific dentistry, welcomes its day-by-day benefits among his patients.

He knows that the soap and chalk base of Kolynos chemically and mechanically cleans and polishes the teeth — its mildly alkaline reaction loosens and dissolves the mucin without the slightest interference with the reaction, secretion or the fermentations of the saliva.

The dentist knows that Kolynos destroys and eliminates 80 to 92% of the mouth bacteria at each brushing—a fact which has been established and demon-

strated through exhaustive tests by Loeffler and Walter of Greifswald, Thresh and Beale of London Hospital Medical College, and others.

Between visits to the dentist, it is most desirable that the activities of the oral bacteria be kept in check as far as possible. For this purpose Kolynos, having germicidal properties and yet harmless to the tissues of the mouth, is an excellent adjunct to the dentist's efforts.

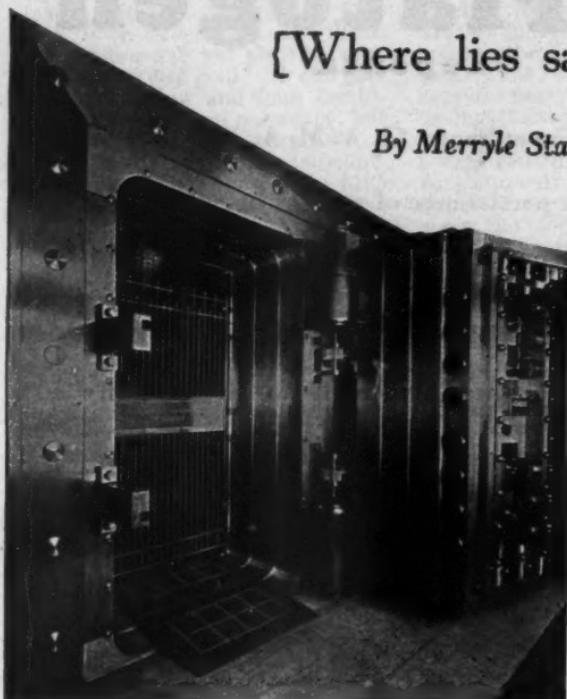
*May we send you a
Physician's Package?*

THE KOLYNOS COMPANY
NEW HAVEN CONNECTICUT

The Doctor ^{and} his Investments

[Where lies safety?]

By Merryle Stanley Rukeyser



Financial
Editor,
Medical
Economics

SPECULATIVE headlines are gradually breaking down the austere investment habits of even conservative folk. Evidence of this change of mental viewpoint is abundant in the correspondence from investors which flows across my desk.

In the thought that an analysis of a specific case is more fruitful of results for other readers than mere generalization, I shall discuss the status of a California doctor who has sought advice. He resides in one of the cities clustering around Los Angeles. Here is his financial status, as told in his own words:

"I have been a reader of your sensible financial articles for some

time past, and am now humbly going to ask your advice on a financial matter. I will put as much confidence in what you say as my banker (I am a national bank director myself), but what I want is advice on my future program.

"I am 36 and want to have if possible \$100,000 to retire on twenty years from now. I have a wife, two boys, 9 and 7, own my home, except a \$1,600 mortgage on which I pay \$200 quarterly, value of home \$9,000. I have \$20,000 life insurance, net about \$600 a month from my practice. I have lost about \$5,000 in bad investments in my nine years.

(Turn the Page)

Muriatogen

Lapenta

Johansen of Copenhagen (J. A. M. A. 1730, '29) says:

"The complete persistence of achylia in patients with pernicious anemia who in other clinical respects have recovered or, rather, have been compensated, undoubtedly supports the theories which imply that achylia is primary to pernicious anemia and that it is the possible cause of the development of pernicious anemia."

Muriatogen (Lapenta), a colloidal condensation product of hydrochloric acid with synthetic silicates, permits the therapeutic use of hydrochloric acid, either alone or associated with pepsin, in the form of coated tablets, overcoming the difficulties of oral administration of the acid itself. *Muriatogen is indicated in all gastric hydrochloric acid deficiencies, from hypochidity to achylia gastrica.* Literature and samples to physicians upon request.

Pitman-Moore Company

Indianapolis

"Now Mr. Rukeyser, what prompted this letter is this. I have just inherited \$12,000 from my father's estate and I feel scared with it. What shall I do with it in order that it will be unimpaired and yet play its part in my \$100,000 goal? I am partial to building and loan certificates. They cause no worry, but would you advise otherwise? I could let the interest compound. I am able to save for deposit \$125 to \$150 each month to add to the \$12,000.

"I have a gambler instinct within me and would get a thrill from buying good stocks to see them go up, but first I want certainty (as near as possible) always looking forward to the 55 to 60 year old period.

business risks by a process of diversification and vigilance.

My advice to the doctor is to place the chief emphasis on conserving the principal of the \$12,000 inheritance, which should become the foundation of his estate. The obvious approach to capital conservation is the use of savings banks, which are in reality investment trusts, giving only a fixed return and holding in their portfolio only securities and mortgages of the highest grade. But since the doctor's chief asset is his own earning power, which should keep up for at least twenty years, he is in position to assume greater hazards.

He could put the \$12,000 in a well managed investment trust, which is virtually a savings bank

The prolonged succession of bull markets in the Coolidge-Mellon-Hoover cycle of prosperity has tended to change the investment standards of the American public. The speculative germs have gotten into the blood of those who formerly sought only safe and sane investment securities. Here is a diagnosis of this new investment psychosis, and a proposed remedy.

"I am financially sick and worried and come to you as a financial doctor."

The patient shows great promise, because he has made a start in diagnosing his case. He is in a mood to set up a workable program, and live up to it.

To some extent, the doctor's wants are paradoxical. He stresses safety, yet he desires capital appreciation too. He wants to have his cake and eat it too. Pure investments, such as United States Government bonds, give a rental on capital, but offer no promise of appreciation. Securities which return more than government bonds include a reward for assuming larger hazards. Business risk inheres in all junior securities, and the common stock buyer, seeking appreciation, cannot run away from the hazards. The scientific investor, however, can insure against busi-

ness with a more speculative tinge. Of the four hundred or more, he should select a trust which is honestly and capably managed. The Investment Managers Company, New York, runs several funds, which are adapted to the needs of the long term investor who aspires to some appreciation without assuming large risks.

Other good investment trusts include those managed by the American Founders Corporation, New York. Both the Brooklyn Trust Company and the City Bank Farmers Trust Company of New York, conduct uniform trust plans which embody investment trust principles under conservative management. Selection of a satisfactorily managed investment trust will give the doctor an opportunity to invest by proxy through experts.

As for future investments out
(Turn to Page 61)

Important Developments in Apparatus for Ultraviolet Therapy....

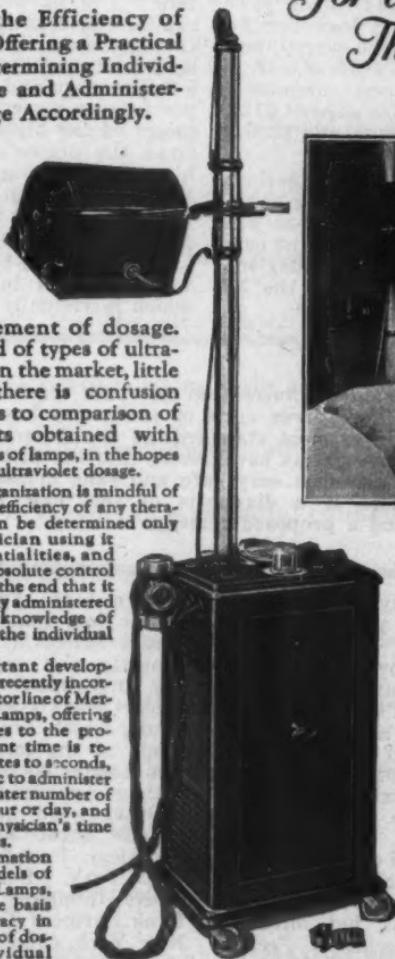
Increasing the Efficiency of Source, and Offering a Practical Basis for Determining Individual Tolerance and Administering Dosage Accordingly.

ONE of the present-day problems in the field of ultraviolet therapy is that of correct measurement of dosage. With a myriad of types of ultraviolet lamps on the market, little wonder that there is confusion when it comes to comparison of clinical results obtained with two or more types of lamps, in the hopes of standardizing ultraviolet dosage.

The Victor organization is mindful of the fact that the efficiency of any therapeutic energy can be determined only when the physician using it knows its potentialities, and has a means of absolute control of the energy, to the end that it can be intelligently administered with a definite knowledge of the dosage given the individual patient.

Several important developments have been recently incorporated in the Victor line of Mercury-Arc Quartz Lamps, offering definite advantages to the profession. Treatment time is reduced from minutes to seconds, enabling the clinic to administer a considerably greater number of treatments per hour or day, and conserving the physician's time during office hours.

Write for information on the latest models of Victor Quartz Lamps, also regarding the basis for greater accuracy in the measurement of dosage to the individual patient.



Model "A" Combination Air-and Water-cooled Quartz Lamp, one of the Victor line of mercury vapor lamps designed to permit the use of intensified, short time technic.

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Physical Therapy Apparatus, Electrocardiographs, and other Specialties

A Directory of English-Speaking PHYSICIANS in Europe

The answer to the patient's question: "What'll I do if I get sick in Paris?"

MEDICAL ECONOMICS has just discovered that a list of English-speaking physicians practicing in Europe is issued regularly under the name of *The Continental Anglo-American Directory*.

The object of the directory is "to furnish useful information to the traveling public and to serve as a bond of union between the British and Americans established on the continent of Europe and in northern Africa."

Because large numbers of American physicians are recom-

Alexandria: Campion, Dr. O., St. Leger, Rue Sidi Mitwalli; Campion, Dr. R. B., Im. de la Mission Americane; Morrison, Dr. A., 3, Place Mohammed Ali; Russell, Dr. E. N., 33, rue Cherif Pacha; Weekly, Dr. A. L., 28, Rue Cherif.

Aix-les-bains: Rendall, Dr. Stanley M., Hotel Thermal.

Algiers: Gubb, Dr. Alfred S., 1, Ch. des Glycines, Mustapha Supre.

Athens: Marden, Dr. Jesse K., 49, Alexander st., Old Phaleron; Yereman, Dr. Owen J., American Women's Hospital; Parmelee, Dr. Ruth A., American Women's Hospital, 4, Philhellene st.

Beaulieu: Trafford, Dr. M. de Lavis, Villa Lavis.

Biarritz: Vale, Dr. Chas. Sillery, Chalet Rochefoucauld, Ave. Victoria.

Bordighera: Hamilton, Dr. G., Villa Pozzoforte.

Brussels: Philippe, Dr. V. F. C. J., 84, Rue de Stassart, Ixelles.

mending trips abroad for themselves and for their patients, and because there is no telling when one may be overtaken by sickness in a land where a strange tongue is spoken, the list is being printed here.

It is bad enough to be sick when away from home, but to be further inconvenienced by linguistic difficulties is even more of a hardship.

Readers of MEDICAL ECONOMICS should find the list useful, both for themselves and for their patients:—

Belgrade: Macphail, Dr. K. S., 20, Visegradska, Director Children's Hospital.

Berlin: Loeb, Dr. L. Farmer, 15, Bamberger str.

Cannes: Ginner, Dr. E. W., 42, rue Georges-Clemenceau; Warren, Dr. A. A., Villa Serpolette, rue Velasquez, Ave. Madrid; Reboul, Dr. A. E., 3, Bd. d'Alsace.

Chateau-Guyon-les-Bains: Reboul, Dr. A. E., Villa Mimosas, rue de Belgique.

Capri (Island of Capri): Pemberton, Dr. A. H., Villa Apollo; Cuomo, Dr. Comm. Vincenzo, Villa Cuomo.

Cairo: Garry, Dr. Gerald Sharia, Elwi, 12; Madden, Dr. F. C., Sharia, 16; Dobbin, Dr. R. S., Sharia Emel Dine; Dibley, Dr. R. V., 1 Sharia El Walda Kasr El Doubara.

Constantinople: Post, Dr. B. Van Dyck, Robert College Rumeli Hissar; Shepard, Dr. Lorrin A.,

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Neutral Potassium Sodium Bismuthotartrate

in aqueous glucose solution

(will not clog the needle)

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Address _____

American Hospital, Rue Sira Selvi, Taxin, Pera.

Evian-les-Bains: Bergougnan, Dr. Paul, 11, Ave. des Mateirons.

Florence: Colinson, Dr. W. J., 16, Via Tournabuoni; Kirch, Dr. G. W. J., 9, Via Palestro.

Heliouan (Egypte): Moore, Dr. S. F., Villa Sakkara.

Hyeres: Biden, Dr. W. P., 2, Ave. de la Victoire.

Lisbon (Portugal): Russell, Dr. David, British Hospital, 49, Rua Saraiva de Carvalho.

Marseilles: Hawthorn, Dr. Edward, 286, rue Paradis.

Mentone: Rendall, Dr. Stanley, Villa Stella-Mare, Prom. du Midi; Samways, Dr. D. W., Villa Flavie.

Monte Carlo: Mitchell, Dr. R. Pryce, Villa Henri; Molloy, Dr. Leonard G. S., Villa Capozzi; Devine, Dr. I. A., 31, Bd. des Moulins; Brooks, Dr. R. Philipp 8, Bd. des Moulins; Gibson, Dr. H. R. B., Winter Palace.

Montecatini: Garry, Dr. Gerald, La Pace Grand Hotel.

Milan: Pasco, Dr. B. Chas. Wm., Via Tadino, 48.

Menaggio: Sinclair, Dr. Georges H., Casa Buona.

Madrid: Grey, Dr. A. G. R., Jenner, 3.

Nice: Sherwood-Dunn, Dr. B., 54, Bd. Victor Hugo; Hort, Dr. F. A., 49, Rue Maréchal Joffre; Brandt, Dr. J. Egerton, 47, Rue Maréchal Joffre.

Naples: Neale, Dr. A. E., 166, Corso Vitorio Emmanuel.

Ospedaletti: Spon, Dr. H. J., 6, Via Cavour.

Paris: Borsch, Dr. Louis, 10, Rue de la Paix; Bove, Dr. Chas. (Surgeon), 18, Rue Spontini; Bruno, Dr. A., 4, rue St. Florentin; Chaussegros, Dr. C., 236, Bd. Raspail; Converse, Dr. G. M., 7, Rue de Chaillot; Gros, Dr. Edmund L., 23, Av. Bois de Boulogne; Jackson, Dr. Summer W., 11, Ave. du Bois de Boulogne; Jarvis, Dr. Chas. G., 81, Bd. Malesherbes; Fiske, Dr. Jas. Porter, 54, Bd. Exelmans; Mac Euan Robinson, Dr., 60, Rue de Miro-mesnil; Mamlock, Dr. H. C., 20, Rue Lesueur; Merrill, Dr. Th. C., 10 bis, rue Herran; Rivière, Dr. Joseph, 25, Rue des Mathurins; Robinson, Dr. Leonard, 28, Rue de Ponthieu; Robinson, Dr. Lionel Field, 2 bis Rue Surcouf; Stanley, Dr. E. Gerald, 51, Rue des Belles Feuilles; Turner, Dr. Robert, 42, rue de Villejust; Wilson-Prevost, Dr. Chas., 55, Av. du Bois de Boulogne.

Port Said: Kennard, Dr. D. G.

Royat-les-Bains: Brandt, Dr. J. Egerton, Royat Palace Hotel.

Rome: Green, Dr. Philip, 20, Piazza di Spagna; Welsford, Dr. Arthur Gerald, Palazzo Signorina, Via Emilia, 86.

Rapallo: Anderson, Dr. Dorothy M., 4, Corso Dante.

San Remo: Aikman, Dr. Kenneth B., Villa Angerer Strada Privata Aquaiciati; Foster, Dr. M. G., Villa San Giovanni.

Siena: Martin, Dr. E. Winifred

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(Accepted by the American Medical Association)

The continuous use of our ointment, over a period of sixteen years, is based upon positive and often excellent results obtained in the treatment of those intractable cases of

Eczema, Ulcus Cruris, Keratitis, Wounds, Burns, etc.

Samples and clinical reports upon request

Heilkraft Medical Co.

Boston, Mass.

IT'S THE STEAM in the Sterilizer THAT COUNTS

RAISE the cover of a Pelton Thermatic Sterilizer boiling on Low Speed and you are greeted by a cloud of steam. Close it . . . and you'd need an x-ray to tell that this Sterilizer is even operating. Steam stays inside where sterilization takes place, instead of condensing into moisture about your office.

The reason: You can turn a Pelton Thermatic down to Low Speed . . . which keeps water boiling safely but doesn't generate excessive and annoying steam.



Escaping Steam is a wasteful, Rust-forming nuisance!



Low Speed on the Pelton Thermatic keeps water boiling safely but slowly . . . one filling lasts all day. Like High Speed and Medium Speed, it is available at will.

If your Sterilizer wastes current all day long boiling too fast . . . if it steams like a freight engine with leaky valves . . . *turn it down*. But if it has no provision for reducing the current by hand, replace it with a Pelton Thermatic . . . the Sterilizer that is *always* under your control. Its proven saving of current soon pays its moderate initial cost.

Your dealer is the man to see . . . but if you prefer particulars by post, sending the coupon below will bring the whole story at once, without obligating you in any way.

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Seville: Dalebrook, Dr. W., 13 Don Remondo.

Tunis: Moore, Dr. Warren S., 9, Rue Al-D'Jazina.

Taormina (Sicily): Sinclair, Dr. Geo. H., Hotel San Domenico.

Vichy: Mondon, Dr. G., 9, Rue Alquié.

Venice: Castelli, Dr. E., Grand Hotel d'Italie; Maude, Dr. C. E., Campo Incurabili.

Viareggio: Godwin, Dr. W. Fenn, Hotel de la Plage.



A Matter of Preference

Reported by Lawyer Hayward



If a bankrupt, or an individual on the eve or afternoon of bankruptcy, settles with one of his creditors in full, the transaction may be set aside as unlawful "preference" within the meaning of the Bankruptcy Law.

This being so, suppose a case where a doctor holds notes of a corporation which are endorsed personally by some of the stockholders, and the corporation is tottering on the financial verge.

"I'm going after Brown, who is the best endorser on the back of the notes, and make him pay them," the doctor declares, but Brown, when approached, strenuously repudiates the possession of ready cash.

"I will give you my personal notes payable every four months to the amount of the notes which you hold," Brown offers.

"That'll be better than the way

things are," the doctor agrees, and the notes are duly signed.

"Of course, I'm going after the corporation and make them transfer enough property to me to protect me on these notes," Brown suggests.

"You fellows can do your own business in your own way," the doctor assures him.

Then the corporation goes into bankruptcy, and the trustee attempts to set aside the transaction with the doctor.

"Go ahead, if you like, and set aside the transfer of the corporation's property to Brown, as far as I am concerned. Our transfer was fair and open, and cannot be impeached," the doctor argues.

This point came before the United States District Court in the Massachusetts case of Olmstead vs. Trust Company 7 A. M. B. R. (N. S.) 774, where the court ruled in the doctor's favor.

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of the
Modern
Syringe**



Remember the old metal syringe? Very far indeed from present day standards of sterility.

40 years ago it was the glass and metal syringe with leather packing. Hard to assemble, unsanitary, it was the best they had.



Then we had the Sub Q syringe asbestos packed. Far from sanitary, leaky and left much to be desired.

Then a big forward step—the all glass luer type syringe. But made of ordinary glass. Plenty of backflow and leakage of needle tip. Scales washed away and breakage in sterilization was the rule.



—then came



**Setting a New High Standard
of Syringe Excellence and
Performance.**

- Resistance (*tempered glass*.)
- Indestructible (*baked-in*) scale.
- Gauged (*leakproof*) Needle tip.
- No backflow (*velvet-smooth grinding*.)
- Scale indicator (*for accurate dosage*.)
- Numbered barrel and Plunger.
- Reinforced Needle tip.
- Sterile (*glass*) finger grip.
- Bevelled to prevent rolling.
- Silver plunger to identify genuine.
- Liberal replacement of broken parts.

*A Masterpiece of Syringe Craft.
Cost No More Than Ordinary
Syringes*

Ask Your Dealer

S. DONIGER & CO., Inc.

Makers of
KROME PLATE
Instruments

23 East 21st Street, New York

"Speaking Frankly"

Cont. from Page 21

possible at the time of his visit, operation, or office call. The balance is turned over to a central office which does the collecting for all the doctors in the community. This office would send a monthly statement with a foot-note stating that unless the bill is attended to there will be difficulty in obtaining further service. Those who are able would make provision for settling the bill; the others of course would come under charity cases. Those who refuse to pay, though able, would be put on a card at the desk and when the phone rings, the doctor or secretary could glance at the card and make the decision.

If one person does the collecting for a group of physicians the cost is less than when it is done individually. The members would receive a weekly check according to the amounts collected, and no bad feeling would be created.

DR. X.

Sense

To the Editor:
I have just
read the article "Economic Fallacies," by Dr. Thomas H. Shaisted
in August MEDICAL ECONOMICS.

I just want to say that this is the best letter and contains more straight-forward common sense to the square inch than any letter heretofore published in MEDICAL ECONOMICS. I feel like adding *Amen* to everything that was said in his article. O. J. C.

Institutions

To the Editor:
Although institutional physicians make up only a relatively small part of the medical profession, I think it would be doing a noble thing if you would discuss in your helpful

little publication "The Economic Destiny of the State Hospital Staff Physician."

The mechanical force in the state hospitals in Illinois is unionized; they get between \$50 and \$70 for a 44-hour week and recently their union voted a 40-hour week at the same pay (time and a half for overtime.)

And yet their investment in educational training is very small indeed compared to that of the physician.

After a tremendous investment in cash and earning time, the state institutional physician is started in at \$150 a month and maintenance; this for a 63 hour week, and being subject to call at any time without a cent of extra pay.

In five years he can possibly work up to \$185 a month and maintenance. Then, in Illinois, he is through progressing, whether he stays on the staff five or fifty years. \$185 a month and maintenance is his limit. He may be lucky enough to have political influence that will draw him into a position as assistant superintendent, but those berths are rare.

That is the situation of the institutional physician in Illinois. The pay in other states, with the possible exception of California, New York, and Massachusetts, is also pitifully small.

What can be done about such a situation. Of course I could have quit years ago, but *there was always that hope that some day I would be lucky enough to reach an assistant superintendency*—or else that some new administration would raise the salary to something in keeping with

Guiatonic

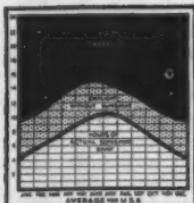
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a standard tonic—but more than that. Creosote and guaiacol make it a specific in coughs and respiratory ills.

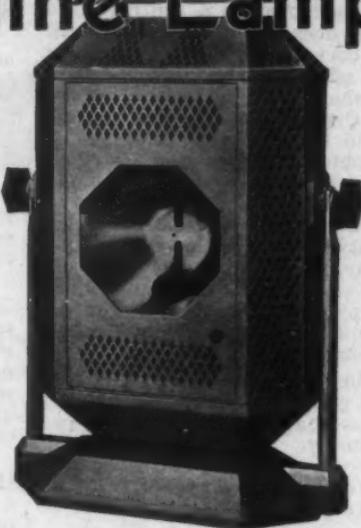
A NEW EVEREADY

Sunshine Lamp



*Chart of
sunshine in the
United States*

Sunshine helps to build health. For many months of the year sunshine is scarce. The Eveready Sunshine Lamp, burning Eveready Sunshine Carbons, makes up for the lack of sunshine, by reproducing its health-giving rays in the home.



FOR A NEW LOWER PRICE

NATIONAL CARBON COMPANY announces a Table Model Eveready Sunshine Lamp—a companion to the Floor Model which has set the standard for safety, convenience and efficiency in sunshine reproduction. It supplies all the rays of natural sunlight. It does not emit the very short ultra-violet rays not found in nature. *The low price brings it within the reach of all.*

Eveready Sunshine Lamps may, with confidence, be recommended by the physician. The policy of National Carbon Company in regard to the sale of Eveready Sunshine Lamps and Carbons to the public has been accepted by the Council on Physical Therapy of the American Medical Association.



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Sunshine Lamp

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EVEREADY
Sunshine Carbons

the purchasing power of the dollar today.

But now the best years of my life have been spent in the service, and I can't quit because institutional work is my field and I know nothing else.

Why does Illinois pay the mechanical force in their state institutions the salary it does? Because they have to; the unions made them. It is not good politics for the administration to have the Union fighting them.

But what a howl would go up if the physicians organized a union! And with all the petty jealousies so rampant among physicians, how could they ever get together long enough to form a union?

The situation looks hopeless. Perhaps it would help to take the institution out of politics and put all on the staff, from the superintendent down, under strict civil service.

Let ability and experience count for something. Let there be a corresponding increase of salary up to a certain limit and have that limit high enough to make the position worth while. Then physicians who wish to make institutional service their life work could do so without financial discontent.

There should be a fair pension when one gets too old to work. As it is now \$185 a month for myself and family means a hand-to-mouth existence, until Gabriel toots the horn. In fact, we are lucky, as we grow older; if we are not dropped from the staff in favor of younger men due for the same experience.

Please discuss the situation of the institutional physician!

ILLINOIS.



BROMO ADONIS No. 1 is effectively prescribed for many functional disorders of the nervous system, and Petit Mal Epilepsy, with lasting results.

BROMO ADONIS No. 2 is giving very satisfactory results in many obstinate cases of Grand Mal Epilepsy.

Free Sample to Interested Physicians

TUCKER PHARMACAL COMPANY
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To the Editor:
I have been

practicing medicine for about 25 years, and it was very early my policy to be lenient toward the fee of my patients when they were raising big families and were in moderate circumstances. I let their bill stand unpaid until their families were reared and they were in comfortable circumstances.

Now, when they are able to pay, they defraud me by going into bankruptcy.

I receive a notice from the Federal Court, 40 miles away, to come and prove my claim. But I know it would be a waste of time to do so, and I let it go.

Can there not be an agitation that could change the bankruptcy laws?

GENERAL PRACTITIONER.

Prescribing To the Editor:
In August

MEDICAL ECONOMICS there appears a criticism on the cross-road doctor's prescribing. Without doubt the criticism is quite true, but how much better is his city brother of today. The cross-roads doctor did no harm with his uva ursi, while his city brother often does plenty with medicine that creates an addict. One of my patients returned to me from one of the leading medical lights in a large city, a confirmed addict, and had to be placed in a retreat for six months.

Medical practice in a big city is sometimes pretty cheap stuff. I have successfully faced all temptations to go there for thirty years, and still have no fear for my financial welfare.

C. P.



“Er-Have I Seen You Before?”

Continued from Page 29.

The young couple made a brief call at the doctor's office. In a rather well appointed waiting room, they were received by a girl in a white uniform who recorded their names and address, and who, after a few moments of uneventful waiting, ushered them into a consultation room. The doctor was cheerful, courteous and efficient, and after a short interview the young couple left, feeling much relieved to get into safe and competent hands.

At the time of the second call, the following conversation occurred.

“Have I seen you before in connection with this case,” the physician inquired.

“Why yes,” answered the young matron, highly amused that the doctor had forgotten, “you told me to call once each month.”

“Yes, of course,” smiled the physician, “and what instructions did I give you?”

The patient, still somewhat amused, answered his questions, following which further advice was given.

The third call was occasioned by some distressing symptoms, which, upon entering the consultation room, were promptly related to the physician.

“Just a moment,” interrupted the physician, “how many times have I seen you in relation to this matter, and what did I prescribe for you heretofore?”

The young patient gathered her

wits, and told the doctor as best she could of her former visits. The case immediately straightened out in the mind of the doctor, and he gave her the needed advice. This time when she left she had a vague feeling of unrest. She was, however, incapable of analyzing her impressions. She felt that things were not going so well.

That evening some friends dropped in for an informal chat. In the course of the conversation, the various visits to the doctor's office were recounted.

The friends were at first astonished, then incredulous.

“Do you mean to tell me,” said one, ‘that your doctor is trying to advise you from month to month when he doesn't remember a thing about your case, or even who you are?”

The doctor got a good panning. He was, of course, unknown to the panners. Each caller put his oar in, and they made no effort to spare him. One of the guests had been through two successful maternal experiences.

“My doctor,” she said, “never had to ask me anything. He had every step of my affair written down on a big card, and always seemed to have it on his desk when I called. He would point out to me how my weight had increased, my diet changed, and all the things that he had prescribed for me from time to time. All of these things were

EMINENT AUTHORITY

has confirmed the fact that the calcium salts come second in importance of all salts entering into the tissues of the body. In

R^ANGIER'S EMULSION

with its calcium content, the medical profession will find a useful nerve tonic agent, and because of its highly solvent, demulcent influence and activity as an eliminant, it constitutes a prescription of dual potency in dealing with many fundamental disorders.

Trial Bottles for a particular case free to physicians.

Angier—Boston 34, Mass.



Quick Relief . . .

The familiar symptoms of gastric hyperacidity are so distressing as to call for immediate relief.

Here lies the keynote of the unusual success of BiSoDoL in clinical usage. BiSoDoL corrects "sour stomach," acid eructations after meals, nausea and vomiting, promptly and effectively.

In addition, BiSoDoL has none of the objectionable features of the single alkali. It offers a balanced formula which neutralizes excess of acid without tending to set up a dangerous alkalosis.

BiSoDoL is a scientific combination of the sodium and magnesium bases with bismuth, digestives and flavoring. It is an ethically presented prescription product.

Write for sample and literature

THE BISODOL COMPANY
130 Bristol Street NEW HAVEN, CONN.
Dept. ME-9

B I S O D O L

The "Cure"

may sometimes prove
worse than the disease

This frequently applies where massive doses of single alkalis are used in gastro-intestinal conditions associated with hyperacidity.

By employing the carefully balanced alkalinizing agent—BiSoDoL—more satisfactory results are usually obtained from lower dosage and there is less danger of setting up an alkalosis.

BiSoDoL is giving prompt relief in such conditions as "sour stomach," cyclic vomiting, the morning sickness of pregnancy and various digestive disorders associated with hyperacidity and acidosis.



on the card. This doctor of yours doesn't even trust his memory, and puts it all on you."

Their guests gone, the young couple found themselves bordering on panic.

"It looks to me," said the young husband, "as if each time we go to this doctor, we might just as well be going to a new one who has no knowledge of the case at all. He is not keeping track of us."

If I presumed to end this story logically I should send the young couple to another doctor. But that isn't what happened. While they were worrying, the expected arrival made its appearance. This doctor was a good doctor, and the successful culmination of the case sealed the bond between doctor and patient.

Now comes the most interesting part of the story. I called on the doctor. He checked the story, step by step, and admitted its accuracy. But he showed me a complete record card of this patient's case. Each call was there, and, generally, a notation of the advice he had given. He maintained a system with just a card for every patient calling at his office.

Why, then, had he failed to make use of them?

He had a very efficient secretary. Perhaps she was not overwise, but she was efficient. He saw a great many patients each day, and with an idea that he was saving time, he had rather recently fallen into the habit of giving this secretary the details of

a call just ended, as she came in to announce the following patient.

She had an intuitive sense that enabled her to get the details of a call from a few words, hurriedly spoken. Formerly, the cards were placed on his desk when the patient was announced. He found that a patient expected about so much preliminary conversation, and concluded that it saved time to depend on the patient or on memory. Strange to say, he thought his memory good, and that he had little need of the cards for that reason.

As a matter of fact, here was a doctor who was too busy to think of the business side of his profession. He forgot that a patient should be handled from a business as well as a professional standpoint. He neglected to look at this procedure with the eyes of the timorous patient, who pins faith on small clues.

We may, in this instance, question his professionalism in his handling of this patient, and the poor use made of his office records. It may be that a physician so established can make his own rules. Perhaps he can even tamper with efficiency.

Certain it is that the doctor who has not yet reached the limit of his capacity to serve cannot afford to tamper with rules which have been tested, and which are bound to contribute substantially to his success or failure.

Office records are not alone to be kept—they are to be used.

FOR INSOMNIA

An ideal agent, for the rest it produces is refreshing and is not followed by depression or other disagreeable after-effects.

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With a minimum dosage a full sedative influence is exerted.

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The Germicidal power of each lot of **HEXYLRESORCINOL SOLUTION S.T. 37** manufactured is insured by careful bacteriological control. The composition is proved by chemical assay and the surface tension accurately determined by means of the du Nouÿ surface tensiometer.

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SAN FRANCISCO BOSTON DALLAS

Practice in the South Seas

Continued from Page 14

elephantiasical scroti, to the extent of a thousand or more, weight from twenty to ninety-seven pounds.

During the war of 1899 (the first battle was fought around our house) we had a variety of amputations of both extremities, as well as shot and shell wounds of many kinds and degrees. Your humble servant was Surgeon General, and almost the whole medical corps for His Majesty the King. Both loyal and rebel wounded were brought in when it was possible to get them to us, so our little band was medical corps for both armies, and we were participants of every action that took place.

There was a great amount of minor surgery coming almost daily. The whole forenoon was taken up with the medical clinic, and minor surgery. The major surgery was reserved for the afternoon, unless it was an emergency case.

The splendid thing about these people was that they would never call a doctor at night, unless they thought it a case of life or death. We were held in too high esteem to be disturbed, except in cases of most extraordinary urgency or suffering; and then they came with apologies and the most po-

lite entreaties. The great majority of these people were extraordinarily appreciative.

While the surgical fees these people could pay were not large (the largest I ever collected from the Samoans was seventy-five dollars), yet they always paid something, and it was always cash or well secured. The longest time asked, where credit was needed, was six months, and that occurred but once in over eight years. Three months was the usual time, and nearly always the debt was paid before the time expired. Even with the small fees, our collections were often over a thousand dollars a month.

In comparing the attitude of these semi-civilized people with those of our civilized nations, I feel that there are many customs and habits of thought that civilization would do well to adopt.

We have been in the home land, since returning from Samoa, some twenty-five years, and experience has been varied. I have practiced in cities of 200,000, and towns of 750 population. Having little money it was necessary to accept something that offered support for the family and education for the two children, so we entered the employment of a forty bed

With the many thousands of cases of

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home treatment is absolutely necessary and prominent Physicians agree that we have no medicinal remedy equal to creosote.

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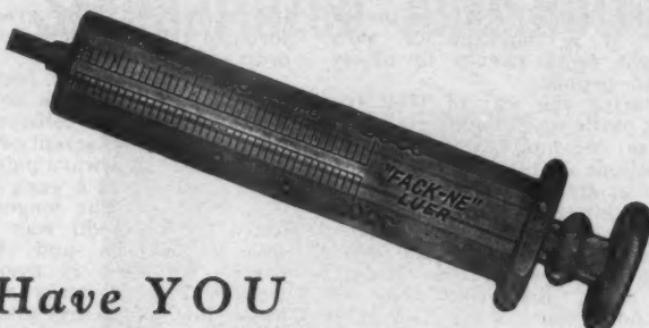
Meets all the requirements of the creosote treatment. It is a palatable preparation and does not disturb the most sensitive stomach.

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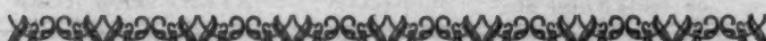
PROBABLY you have intended to try this new Syringe, with the novel feature which makes hypodermatic medication so much easier and more accurate.

The "Window Scale" cannot be fully appreciated until you hold the Syringe in your hand and see how clearly the solution level shows in the "window" between the indelibly marked twin scales.

It's an easy matter to ask your secretary to phone the nearest dealer for several Faichney Window Scale Syringes in sizes convenient for your needs. Do it today!

Thousands of times a day
FAICK-NE WINDOW-SCALE
SYRINGES
say
"THAT'S THE CORRECT
DOSAGE"

FAICHNEY
Instrument Corp.
Watertown, N. Y.



sanitarium in the middle West. I, as medical superintendent.

Here we helped to teach the twenty-five nurses in training, and did all the surgery, and a large part of the medical work. We never worked harder in our lives, and received only a living wage, and hardly that. Yet we were accused of mercenary motives, maligned, and talked of.

Finally I took up private practice, and in the fall of 1911 we found ourselves in a small town in northeastern Nebraska. The practice was about as the average physician finds it in these rural districts, and I had my share. I did what surgery I could, but in these places the people have been educated to go to the larger centers and clinics. People are very much like sheep, and once they are running in a direction, stopping them is just about as likely as turning Niagara Falls to flowing the other way.

I have had patients leave me to go to the city, for no other reason than that I was located in a small place. Others go on account of what their neighbors may say. Then again I have had patients travel two hundred miles to come to me for surgery, when they had good surgeons where they lived, and when asked why, they threw up their hands in holy horror and exclaimed, "I would not let those butchers touch me!"

We have heard much about ethics but from my observation this animal is nearly extinct. It seems it has not been able to become acclimatized here. Possibly it is like the American Bison, only to be found in government reserves, or far away in the wilds. Professional jealousy is too deeply rooted, and flourishes too luxuriantly to permit the healthy growth and rapid increase of such a delicate creature. During two years practice in the British Colony of New Zealand, in a city of 70,000, I observed more brotherly interest and ethical treatment among the profession than I have found in this country.

The immediate competition in

Not "Just Another"

local treatment
for hemorrhoids

MANY YEARS of clinical experience have soundly demonstrated the efficacy of Unguentine Rectal Cones in clearing up the most troublesome symptoms of internal hemorrhoids.

They soothe rectal burning, smarting and itching and afford relief, even in those severe cases where operation is eventually necessary.

Very often, they are also able to effect a marked reduction in size. Clinical records indicate that in a majority of cases, not too far advanced, they may bring about permanent relief.

If you use Unguentine Rectal Cones, you will be impressed with the efficacy of this treatment. They are packaged in boxes of twelve. We should be glad to send you a trial box without cost. Address Medical Department, The Norwich Pharmacal Company, Norwich, N. Y.

Each Cone contains:

Alum Compound (non-irritating)	3 grs.
Ergotin	1 gr.
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Ext. Belladonna	1/2 gr.
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Many ill-defined pathologic conditions, characterized by loss of weight and poor appetite, are the sequelae of infectious diseases, surgical operations and parturition. For restoring lost vitality, improving the appetite and correcting nerve-cell disorder

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OXO-ATE and OXO-ATE "B"*

Northeastern Nebraska was clean, but I could not get co-operation. Maybe, it was my own fault. But it was not because I did not want it, or strive to cultivate it.

Finally the World War came, with a commission in the army. Upon being discharged, I returned home and in a few months became located in a larger center, a city of more than 10,000 inhabitants, and about thirty-five physicians (with a number of osteopaths, chiropractors, etc.)

Here I practiced six years, and while relations with the profession were most agreeable, yet I could get no co-operation. One of the principal reasons, I think, was that I did not split fees. I had always heard the best of the profession decry such doings, as unprofessional and unethical. But I finally discovered that the fellow who does not split fees is the exception, rather than the rule. I am not going to enter into the merits or demerits of the mat-

ter, as there are two sides to every question. At any rate, I now split fees just as the rest do, and I am not afraid to say it to the world.

After six years in this location, I was offered a partnership where I decided I could better utilize my surgical experience, so again we moved. This was the first partnership I had ever undertaken, as I had always thought such an alliance would not work to the satisfaction of all concerned. After three years trial, we dissolved the combine.

I now work in a small hospital conducted privately, which position has proven very satisfactory. The hospital is a large private home, converted. I am convinced that the best and most personal service is rendered in the small hospital.

As the years have passed, the question has arisen in my mind: why are the medical men abandoning the smaller centers? I have come to the conclusion that



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it is at least partly due to the following: the practitioner in the small center, in the past as well as now, refused to co-operate with his colleagues in the same town or near by and would call Doctor Big Stuff from a distance. Often some of the nearer colleagues could have given better counsel. For reasons better known to the doctor, the patient is told that the only counsel for them to get is as above.

Thus, during the years the public has been trained that the only worth-while men were in the large centers. Then when a serious surgical operation needs to be done, the only place to get it done is in the city. After such training, should the people be blamed?

Then came the automobile, and this made it easy for Farmer Heavy Dough, as well as for Farmer Little Coin, to go to the large centers or clinics, passing their home doctor's door, and paying a double fee for a service no better. Whose fault is it? Who educated the public to think as they do? Did the doctors in the large centers do anything to make these folks think better of their home practitioner? In a few exceptions possibly, but not in the majority of cases.

What is the cure? Haven't we always been taught that the first principal is to find the cause and remove it if possible. The malady having gone too far, involving too many vital organs, or too widely distributed for removal, and no curative remedy at hand,

we can do no more than make the patient as comfortable as possible, and await the end.

Suppose the men in the smaller centers should co-operate, keep everything possible at home, get right down to hard study and work, taking the responsibility of all cases on their own shoulders. Let them take turns visiting the clinics, and upon returning have a round table discussion of what they have learned. Pluck out the jealous eye and practice only with an honest desire to be of the most good, and render the best service, so far as within us lies the ability.

Whenever we can render a service to a colleague, let us go out of our way to do it. Give all to understand that we are men together, and dependent upon one another. When the medical profession, as a whole, begins doing this, then will the small community practitioner flourish and come into his own. The respect of the community, both small and great, will be his.

I believe the doctor should be able to gather enough wealth to enable him to have some of the comforts of life, and to take an occasional holiday in which to renew his youth and regain pep for his future work.

In this retrospective of thirty-five years, an immense amount of details, incidents and experiences, have had to be left out, but I hope I have said something that will help some to think along lines that will be for the betterment of our profession.

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A PLASTIC PREPARATION OF IRISH PEAT
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That depends entirely upon the point of view.

The patient will say it is the sterilizer. That is the equipment by which he or she gauges your care in prevention of infection. Consciously or subconsciously every patient looks for a sterilizer.

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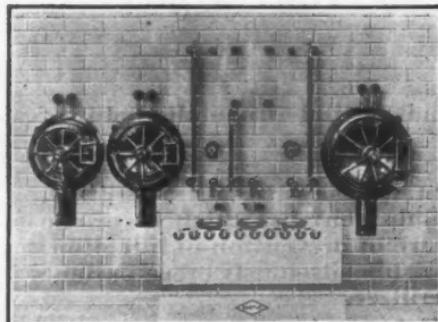


Castle Leads in Hospital

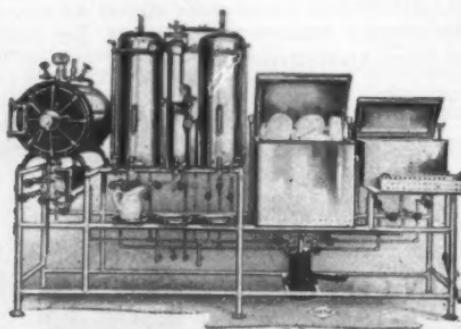
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Castle Sterilizer Improvements Adopted by Hospitals Everywhere

Principles of correct sterilization, pioneered by Castle, influenced hospitals all over the country to select Castle equipment. The three institutions names here follow have recognized the value of Castle improvements:

17 Castle originated the principle of forced air evacuation for autoclaves, and eliminated the complicated vacuum device.

26 Castle was the first manufacturer to add automatic control to insure positive discharge of all air and water, and thus eliminated the human element.

27 Castle connected this automatic discharge direct to plumbing, and thereby eliminated the unsightly basin on the floor.

28 Improved methods of Recessed Installation.

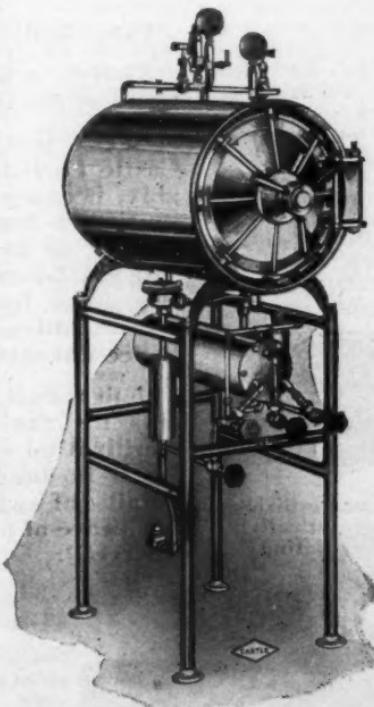
29 Improved piping and venting systems which eliminated possibility of pollution of water supply or contamination of sterilizers themselves.

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"Is it truly sterile?"

That is a question always in the mind of the conscientious doctor.

"Yes" is the answer which the Castle *Full Automatic* gives invariably, because his sterilizer is *automatically* brought to, and held at boiling or sterilizing temperature. The old 3-heat type of sterilizer, on the other hand, might be left on "low" and not actually boil, and hence not sterilize.

The new *Full Automatic* thinks and acts for the doctor. It gives true sterilization without worry or delay. He is no longer burdened by petty details of switch manipulation—he has peace of mind and freedom from "nerves".



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is automatically
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The Doctor and His Investments

Continued from Page 41

of saved income, the doctor should recognize that he has no contract with the Almighty which assures he will live until 55 or 60. His financial program at present seems contingent on such an optimistic expectation. The physician earns \$7,200 but would leave an insurance estate which would return only \$1,000. The \$12,000 fund would return another \$600 a year. In estimating the needs of his family after death, the doctor should deduct his own personal expenditures and also his savings. With a house nearly paid for, the doctor already has made some provision for his family, but he should recognize that the family needs will be much larger in about eight years when his children are looking forward to a college education.

Insurance companies have devised special policies to cover the obligations of parents toward young children. One company, in an appeal, depicts a child holding up his father, and saying: "Your money or our life daddy!" If a child could analyze his financial problem, he would realize that the remark was more than a mere jest.

In speaking to fathers, one insurance analyst said: "Your children do need your life or money. They themselves do not realize the actual facts—they are play-

ing. They know that what they say brings a smile, a shine of the eyes, a double warmth of greeting which they understand instinct. The truth is, though they really must have your money or your life—your life which means your money.

"Their present welfare, their hopes, their education, their dreams, their chances in life—all depend upon you, upon your life or money. You admit the need and their right to your protection and care, and you recognize and you meet the right willingly, gladly."

How much insurance does each child need? The answer depends on the standard of living of the family and the attitude toward higher education. Columbia University estimates that the average cost of a college education is \$1338 a year. At least \$5,000 would be needed on this basis for a full four year course, and additional allowances would have to be made for post-graduate or professional school work. In its budget of the student's expenses, Columbia University has prepared the subjoined figures:

Tuition and Fees	\$320	\$320
Room (36 weeks)	212	170
Board (36 weeks)	396	288
Books	40	25
Laundry	50	34
Additional expenses, includ-		

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A scientific development for colonic therapy which adds to your present practice a distinctive service for your patients.

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It is common practice to take toilet powders for granted, the assumption being that they are all more or less alike...And yet, for twenty years certain discriminating physicians all over the country, particularly in New England, have used and prescribed Sykes Comfort Powder exclusively because of superior features which are immediately apparent when the product is used...It was this persistent demand for a product, obviously meritorious, that led The Bay Company to acquire it...Sykes Comfort Powder is unusually effective because it adheres to the skin for a much longer period than is the case with ordinary powders.

This allows the soothing, healing, antiseptic ingredients to accomplish the desired purpose...Sykes Comfort Powder is recommended for general nursery and sick-room use. The story of its record and performance is yours for the asking; also a sample. Kindly use the coupon.

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ing clothing, travel, charity, organizations, student activi- ties, fee, and sundries	320	220
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\$1338 \$1057

The doctor at the age of 36 could take out a \$5,000 ordinary life policy for each child at an annual cost of \$123.60 each. Thus, if the father should prematurely pass to the great beyond, the children's education will be provided for. If he lives, the cash surrender value of the policy, though inadequate to pay the entire cost of a college education, will contribute substantially to the educational fund. Accordingly, the doctor need not die to win.

Of course, if the doctor will enlarge his insurance expenditures still further, he can create a sufficiently large fund by means of insurance. An alternative method for using insurance is to take out a policy on the life of the child. All com-

panies will not accept minors as policy holders, but a number of strong companies, including the Mutual Life Insurance Company of New York, will write policies on children. If endowment policies are taken on children's lives and the premiums are paid by the parents, lump sum estates will be created by the mere stroke of the pen. At maturity of the policy, the child will get the total cash as capital with which to start out on a business career, or with which to finance a college education.

The only loophole in this plan is that the breadwinner might die in the meantime, and make no provision for payment of premium on the policies on the children's lives. This hazard could be provided against by a special insurance policy on the parent's life, which would be sure to provide enough cash to meet the premium on the children's policies. Any competent agent could figure out the amount required.

Perhaps half of the doctor's

How to Make a Decision

In the selection of a mineral oil emulsion for the treatment of constipation you may safely let your decision be guided by (1) The exceptionally fine subdivision of the emulsion for stability and thorough mixing with the intestinal contents: (2) Palatability—no sugar, no alkalies, no alcohol, no flavoring.

This is Agarol. It softens the intestinal contents, making evacuation easy and painless. In addition, Agarol gently stimulates the peristaltic action tending to reestablish normal function.

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IRRIGOL is an alkaline, saline powder. Dissolved in hot or recently boiled water it forms an aseptic solution that alkalizes, deodorizes and cleanses without interfering with physiological function.

Used by the profession for twenty-five years. A pound (\$1.00) package makes twenty gallons of balanced solution.

Samples of both on request.

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Dr. _____

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the
Coupon

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savings will go into additional insurance.

Then if he needs an outside spur to regular saving he can carry shares on the instalment plan, paying in a dollar per share a month, in a building and loan association. Care should be exercised in selecting one that is well managed. An independent check should be made through a bank or through the financial editor of a local newspaper. The laws in New York and New Jersey are particularly well drawn up to protect the participants. Companies, like the Railroad Men's Building and Loan Association, Serial Building & Loan As-

sociation, and the Franklin Society of New York, are capably managed. Then with a backlog of a home, an insurance estate, building and loan, and a nest egg in an investment trust, the doctor is in position to begin to acquire dividend paying high grade railroad, public utility, industrial and financial stocks.

In each case, he should seek disinterested competent advice. As a general rule, he should first select shares of outstanding successes in fields that appear to have a good future. He can minimize his mistakes by diversifying wisely.

(Turn the Page)

Investment Counselors for over a Quarter Century

A Broader View Program

. . . developed by Brookmire,
and available now to investors.

No two investors have identical problems or objectives. When the capital available for investment varies from a few thousand to \$100,000 and more, it becomes obvious that there are most radical differences in the program which should be followed.

From less than \$5,000 to more than \$100,000

For this reason, Brookmire has worked out a "Broader View Program", so arranged that one section applies to the investor with less than \$5,000, a second to more than \$5,000, another to \$50,000, and so on. In preparing this, our investment and research staff had the background of thousands of investors' experience to draw on.

No one with securities, or funds for investment, should fail to secure this report. It will be sent with our compliments. When mailing the coupon, please indicate which section interests you.

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- No. 4 (\$50,000 - \$100,000)

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Please send me your
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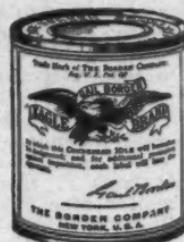
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To the Rescue

in



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IT IS now more than 70 years since Gail Borden's can of milk first made its appearance — the newly invented "condensed milk" which was to mean so much to so many babies.

During all these years, physicians have called constantly upon Eagle Brand for aid in the artificial feeding of infants. Again and again, in countless desperate cases, Eagle Brand has demonstrated its remarkable digestibility — has brought starving babies back to health.

Today, Eagle Brand still comes to the rescue in difficult feeding problems. It is, moreover, being used with excellent nutritional results in the feeding of normal infants, when properly modified

and supplemented to suit the individual case. Its unsurpassed digestibility, its absolute purity and uniformity, its keeping quality, its ease of formula preparation—all these are important factors that lead so many physicians to recommend its use.

That any one proprietary infant food should have been in constant and increasing use through three-quarters of a century of changing theories and formulae is surely significant. Eagle Brand can be of real service to you. We shall be glad to answer any inquiries, and to supply you with literature upon request.

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One individual, who handles his surplus primarily with an eye to future appreciation, rather than current return, has set up the subjoined investment program. It embodies diversification.

In specializing in common stocks, the investor, realizing that he is assuming business risk, has chosen a medium which should enable him over the long pull to share in the future prosperity of the country. His list, though suited to a young man with large earning power, would not of course be adapted to the needs of an investor who is dependent to any extent on the income from his investments. The list is given here, not for the idea of recommending the particular securities included, but to indicate proper financial architecture in laying out a long term program:

Bank Stocks

- 28 National City Bank
- 25 Bank of America
- 5 Equitable Trust Co.
- 50 Bankers Trust Company

Railroads

- 25 Northern Pacific
- 100 Southern Pacific
- 10 Baltimore & Ohio

Mail Order & Chain Stores

- 25 Sears Roebuck
- 25 Montgomery Ward
- 25 Woolworth Co.
- 25 R. H. Macy & Co.

Public Utilities

- 25 American Telephone & Telegraph
- 25 Consolidated Gas
- 25 Columbia Gas & Electric Company

Miscellaneous

- 100 International Paper "C"
- 25 International Harvester
- 25 United States Steel
- 25 Union Carbon & Carbide
- 25 E. I. du Pont de Nemours & Co.
- 25 General Motors Corporation
- 25 General Electric Company
- 25 Allied Chemical & Dye Corporation
- 25 American Radiator & Standard Sanitary

(Turn the Page)



MAKING MONEY IN STOCKS

MANY people think that "playing the Stock Market" is a risky, fool's business in which the cards are stacked against the amateur investor. And they are right—as long as the amateur remains an amateur investor. But, consistent and substantial profits can be made in stocks, year in and year out, without gambling and without taking undue risks.

The vast majority of Investment Research Bureau clients make excellent profits every year by buying under-valued securities at the proper time and by selling them at the proper time. In fact, a great many of our subscribers, who follow enlightened, scientific methods in purchasing stocks, make very large percentages yearly on the capital employed.

You can do the same. If you will send us your name and address, we shall be glad to send you a free copy of an interesting little book,

"Making Money in Stocks"

which describes the method thousands of people all over the world are using to add to their capital at a faster rate than they ever thought possible. No obligation is incurred in sending for this book. Simply address, Investment Research Bureau, Div. 1005, Auburn, N. Y.

INVESTMENT RESEARCH BUREAU

25 Standard Oil of New Jersey

In approaching his \$100,000 goal, the doctor should recognize that his \$12,000 fund will double every twelve years, if it earns only 6 per cent per annum. Furthermore, his insurance will each year attain a greater cash surrender value, which will play a part in reaching his objective.

Whether he will be skillful or sufficiently well advised to pick common stocks which will appreciate at a more rapid rate remains to be seen. However, if he buys shares of outstanding companies in diversified fields and pays for them outright he is unlikely to repeat his former experience of losing his principal.

If the doctor wishes to make sure he will get his \$100,000, he should seek to increase his investable income. Presumably he has not yet attained the maximum income from his practice. There should yet be opportunity for growth in accordance with the development of the city in which he lives. If such Western communities develop only at 10 per cent the rate the realtors describe, the growth factor will be notable.

Except for the psychological advantage of owning a house free and clear, I see no special advantage in continuing to pay off the mortgage. It might be better to continue the mortgage and put the funds in high grade marketable securities. It is easier to sell a building with a mortgage than without one.

It is extremely important that the doctor select securities be-

cause they fit in with his broad program, rather than because some casual acquaintance or patient happens to remark that a particular security looks good. He should stay away from brokers who try to incite clients to marginal/speculation. For a man in his position the best place to buy stocks and bonds is through the bank.

Convertible bonds, by the way, which have become increasingly popular, are well adapted to the doctor's needs. They give the fixed income of bonds, and yet have some of the speculative or profit making features of common stocks. The following convertible bonds have interesting features: American Telephone & Telegraph 4½s, Chesapeake Corporation 5s, Alleghany Corporations 5s, Commercial Investment Trust 5½s, and International Cement 5s.

Ups and Downs

-a monthly review by the financial editor

Facing unprecedented financial conditions, the Federal Reserve authorities have fabricated new instruments of control. In mid-August announcement of the new double edged policy was disclosed. At a time when bankers are usually concerned primarily with providing the funds for crop movement and for financing Fall trade expansion, the Federal Reserve Bank of New York marked

HAIMASED

An agreeable, non-irritating aromatic solution representing two and one-half grains Sodium Thiocyanate to each fluid dram.

Prepared only by

THE TILDEN COMPANY

Pharmaceutical Chemists since 1848

New Lebanon, N. Y.

St. Louis, Mo.

(Physician's sample on Request)

A remarkable
growth, but merited by
the unusual results ac-
complished

SUCH HAS BEEN THE PROGRESS MADE
DURING THE PAST TEN MONTHS BY—

Calmitol

*The dependable anti-pruritic
which was introduced into this
country from the great house of
Siegfried.*

Rarely is it the good fortune of a pharmaceutical house to be able to place at the prescription disposal of physicians, a product of such outstanding therapeutic value.

Usually, the product offered is "just another preparation," and seldom has it the real worth and merit that would be found in the physician's own prescription for the same condition.

THE RESULTS OF TEN MONTHS

CALMITOL is truly a therapeutic advance in treatment. It is rightly named, for, so well does it do its work in erythematous, and urticarial dermatoses, that one

During the past ten months nearly 100,000 physicians have used CALMITOL, and of this vast number, nearly three-quarters

One cannot question facts—or refute truths—an impression returned from physicians, built up during such a comprehensive survey of results.

EXTRACTS TAKEN FROM CASE RECORDS

CALMITOL IN PRE-OPERATIVE AND POST-OPERATIVE WORK

"I have been using CALMITOL for several months. The liquid is unquestionably the very best preparation I have ever found to relieve itching, especially in my surgical work before gall-bladder operations where jaundice and itching is sometimes so distressing. I find CALMITOL promptly relieves the itching."

"The ointment, if applied freely following supra-pubic cystotomy, will keep the urine from irritating the skin and add very materially to the patient's comfort, until drainage has ceased." Dr. B—

"About a week ago I was called in consultation with Dr. S. to see a child with Scarlet Fever in the desquamation period, with a very large abscess just behind the sterno-mastoid.

"I incised same and packed cavity. The next day I removed the packing and gave orders for further treatment. The child was very uncomfortable, restless and itching all over. I suggested CALMITOL ointment covering almost entire body. This gave the child instant relief and comfort, and as its mother stated: 'The ointment made it sleep and it got the only rest it had had for two weeks.' Dr. A—

CALMITOL IN URTICARIA AND POISON IVY

"Having had such excellent results in several forms of Urticaria, I decided to try CALMITOL liquid in a case of Poison Ivy rash which was on both upper eyelids, cheeks and hands of a young patient. The relief was miraculous. Itching disappeared immediately and the boy was back in school in three days." Dr. C—

"Have used CALMITOL at my hospital and in my office with most remarkable and prompt results. CALMITOL relieves the intense itching and inflammation in Urticaria and Chronic Eczema almost instantly. In my experience of 21 years in treating skin diseases, it's the best thing that I have run across." Dr. W—

NO GUESSWORK — NO DOUBTS — INVARIABLY PRACTICAL

NTS CALMITOL PROPAGANDA

in treatment of Pruritus and Irritant Skin Diseases. It work in applied in the various forms of pruritic eczematous, that lost instantly it "calms it all."

physns throughout the country have been made acquainted
y thiper cent are using and prescribing CALMITOL.

—an is reasonable to assume that this almost unbelievable
mpanely short time, can be explained only by one word—

WORD-ENT TO US BY OUR MEDICAL FRIENDS

CALMITOL IN VARIOUS FORMS OF ECZEMA

"I have had the most satisfactory results in using CALMITOL ointment on a case of Eczema of four years' standing. After less than two months' treatment with CALMITOL, morning and night, the skin has completely cleared up. It surely is a most valuable preparation." Dr. C—
"For me CALMITOL has performed wonders, which I am happy to state.

"At the time I received your preparation, I had on hand three most obstinate cases of Pruritus, and also a case of Chronic Eczema of long standing.

"In every case, the first application relieved all itching and burning sensations. My patients say, it is the best thing they have ever used.

"I must truthfully state that I shall never be without CALMITOL, both liquid and ointment, and shall prescribe them both at every opportunity, for I consider these preparations are a savior of mankind." Dr. B—

"I have never used anything as efficient in allaying the itching of Eczema and other Skin Diseases. It is almost marvelous in its action." Dr. N—

PRURITUS

"In the treatment of all forms of Pruritus and Itching Skin Affections I invariably prescribe CALMITOL. You have a most excellent and superior product for the treatment of these aggravating and difficult to treat conditions." Dr. O—

ECZEMA OF THE EXTERNAL EAR

"My work is Otology. I have never found any preparation for the treatment of Eczema of the external auditory canal that has given me such desirable and almost specific results as CALMITOL has done. It is in a class by itself." Dr. M—

PROMPT, EFFECTIVE, DEPENDABLE RESULTS

OTHER IMPORTANT USES FOR CALMITOL

Pruritus Ani, Vulvae, and Scroti
Prurigo, Neuro-Dermatitis
Pruritus of the Menstrual Period
Pruritus Senilis and Hiemalis
For the Relief of Insect Bites
"Bath Itch" and "Golf-Foot-Itch"

CAUTION

In treating affections of the anus, vulva, scrotum, and all delicate parts or excoriated surfaces, the ointment should be used.

SPECIAL OFFER TO HOSPITALS AND DISPENSING PHYSICIANS

To hospitals and physicians who dispense their own drugs, a special price of \$8 per dozen for the CALMITOL ointment, and \$12 per dozen for the liquid will be allowed. In addition all transportation charges will be prepaid.

**DO NOT NEGLECT TO SIGN AND
MAIL THE ATTACHED CARD TO
US—BETTER DO IT NOW WHILE
YOU THINK OF IT.**

THOS. LEEMING & CO., INC.
101 West 31st Street New York City

up its rediscount rate from 5 to 6 per cent.

If there had been no offset to that maneuver, it might have had a chilling effect on business sentiment, but at the same time the regional bank threw a sop to business and agriculture by reducing the buying rate on acceptances from 5½ to 5⅓ per cent.

On the first day that the rate increase went into effect, the amateur public, terrified at the prospects of losing their margins, threw over stocks with reckless abandon. Meantime, informed buyers—institutional and individual—bought them, and prices promptly recovered. The buyers recognized that the significant point about Federal Reserve policy was the disclosure of an intention to pump additional Reserve credit into the market during the fall period through the acquisition of acceptances in the open market.

It has been the habit in recent years to increase the Reserve credit outstanding by about \$300,000,000 during the fall period. With brokers loans in midsummer rising to unprecedented peaks, the Federal Reserve raised the rediscount rate to try to prevent the flow of the additional credit released into speculative channels. The rate rise was a psychological offset to the liberal open market policy.

* * *

With selected industrial and public utility shares at unprecedented summits, there has been considerable switching late in the

summer to less exploited groups of stocks, such as the oils and rails, which sell on a lower basis of earning power and known assets.

Net earnings for the railroads have been higher thus far this year than in any corresponding period in the history of transportation. The carrying of extra freight hauls contributes largely to profits, for overhead does not rise correspondingly with gross revenues.

In commenting on the growth possibilities of the railroads, E. E. Lomis, president of the Lehigh Valley Railroad Company, told me, "The country as a whole is well served by rail lines. It seems natural that there will be a continuance of the policy of expanding present facilities in an effort to make the existing plant handle an increasing volume of traffic, with the most economical operation and the greatest possible efficiency.

"That such a policy will be beneficial to the public as well as to the railroads is evidenced by the operating results for the first five months of the present year. During that period car loadings increased nearly 800,000 when compared with the same period of 1928. Gross revenues increased 123 million dollars and the carriers converted more than 81 million dollars of this increase into net operating income in spite of the fact that their tax bill for the same period increased nearly 10% million dollars.

(Turn the Page)

DANISH OINTMENT

(TILDEN)

The approved 24-hour treatment for
SCABIES

Price per pound \$1.28. Price per dozen 2-oz. jars \$3.00

A trial will convince you.

(Physician's sample free upon request)

THE TILDEN COMPANY
Pharmacists and Chemists since 1848

New Lebanon, N. Y.

St. Louis, Mo.

What Bacteriological Tests Proved



IN AN investigation of over 2000 patients suffering from constipation and intestinal toxemia, the head of the Battle Creek Sanitarium laboratory found that the normal acid-forming bacteria could be restored in a satisfactory and efficient manner by the persistent use of

Lacto-Dextrin

(Lactose 73%—Dextrin 25%)

The extent of the change depends upon the amount taken, the length of time it has been given and the degree to which the intestine has been crippled by disease.

By exclusion of putrescent foods and the continuous use of Lacto-Dextrin in smaller quantities, an aciduric flora may be maintained after it has once been established by Lacto-Dextrin feeding.

In cases of obstinate constipation, quicker results may be obtained by the combined use of Lacto-Dextrin with Psylla (plantago psyllium)—a plant seed which provides bulk and lubrication.

Wouldn't you like to try Lacto-Dextrin and Psylla in your own practice? If so, just fill in the coupon and we will be glad to send you free clinical trial specimens and copy of the scientific presentation, "A Practical Method of Changing the Intestinal Flora."

THE BATTLE CREEK FOOD COMPANY

Dept. ME-9, Battle Creek, Michigan

Send me, without obligation, trial tins of Lacto-Dextrin and Psylla, also copy of treatise, "A Practical Method of Changing the Intestinal Flora."

Name.....

Address (write on margin below)

"Transportation expense, which covers the actual cost of moving traffic, increased only \$10,804,000. It is interesting to note that taxes, over which railway management has no control, took from the 123 million dollars increased revenue practically as much as it actually cost the carriers to move the additional business over their rails."

* * *

Credit conditions are such that the investor, who needs current income, can do particularly well in the bond and preferred stock market.

* * *

Underlying the continued demand for selected stocks of the best grade is the base of a new high level of earning power on the part of dominant corporations in the railroad, public utility and industrial fields.

* * *

Investment trusts and trading companies continue to be borne in unprecedented numbers. They are changing the behavior of fi-

nancial markets. To an increasing extent, informed and discriminating buying is being substituted for sucker purchases. Financiers through these new media are becoming chaperones for the public along the lane where the money sprouts.

* * *

Alfred T. Sloan, Jr., president of the General Motors Corporation, when asked whether there was a condition of overproduction in the automobile industry, replied: "It is very hard to say whether the industry has excessive capacity or not. Undoubtedly if other manufacturers were running their plants at capacity every day of the year, more cars could be produced than could be absorbed, but that has been impossible since the industry began. Due to the seasonal demand, the natural growth of the domestic market along with the increase in population of wealth and export markets, I do not think considering it as a broad question that there is any great amount of surplus capacity."

Enlisting the Patient's Cooperation

IN this age of popularized medicine, physicians must, of course, be sure that their instruction will not be invalidated by counter-prescribing on the part of the patient or his friends.

Nowhere is this more true than in the field of personal laxatives, where many conflicting theories and practices have been brought before the public.

Fortunately, the practical and scientific advantages of Feen-a-mint — its strain-free action — even distribution over the intestinal mucosa, and almost

complete elimination — are easily explained to the layman. The medical reasons for placing phenolphthalein in chewing gum form are thoroughly sound, and whenever Feen-a-mint is recommended, the physician is assured of the important element of patient cooperation and interest. Feen-a-mint is reasonably priced, available at all druggists' and extremely palatable for children and adults.

FEEN-A-MINT

The Chewing Laxative

A generous Physician's Trial Supply will gladly be sent you free on request.

FROM

Luxury

TO
DAILY
USE



*Sugar was once the prized
relish of kings and queens*

THE USE of sugar affords a good example of the service of science to man and the changes that we may expect in our food supply in this country. Sugar has been all around us for countless ages, but we did not know how to get it. In Queen Elizabeth's time, a pound of sugar cost as much as a quarter of veal. One of the principal expenditures of King John of France when, following the battle of Poitiers, he was being taken to England, was for sugar, one of the kingly luxuries of the day. In the present day, of course, few foods can compete in price with sugar in their economy of fuel value.

The chief dietary interest in sugar today, however, with the exception of active children and physically active adults, centers in its value as a condiment. Scientific and medical authorities insist upon the mixed and varied diet. Most food substances if eaten alone would be bland and unpalatable. A dash of sugar in milk desserts, on berries and in stewed fruits, on cereals, in vegetables and meats while they are cooking may result in a regimen that is relished by both children and adults.

No one should gorge or overeat of sugar or sugar-containing foods, or any other food. Neither need anyone, without the advice of a physician, undertake to eliminate sugar or any other valuable food from the diet. Variation, diversity, variety and balance are the requirements of the healthful diet. Most foods are more delicious and nourishing with sugar. The Sugar Institute, 129 Front Street, New York, N. Y.

Everybody's Business

Continued from Page 19

this tends to develop an invisible government concentrated in the hands of a few people who control the machinery that produces opinions and forms habits.

Not even long-established rules and principles of business and finance are safe from inspired propaganda. The forces working to advance stock prices and realize huge profits have presented only the bright spots of the picture. They have directed attention to the Federal Reserve ratio of 70 per cent, and a rediscounting of only a little more than a billion dollars as compared with over two billions in 1920. This is offered as evidence that there is no credit inflation.

But let us turn to the real truth as expressed by an economist who insists upon presenting the indisputable facts: "When bank reserves are low and 46 per cent

of them are borrowed; when the ratio of gold to bank credit is so low that in that regard we are in an uncharted area; when the investment yield on stocks is not more than three per cent at a time when the United States Government must pay five and one-eighth per cent for nine months' loans; when, upon such prices, even with large margins, there has been erected a structure of loans and deposit currency which runs to such a sum as \$9,000,000,000; it would appear that it may reasonably be said that bank credit is inflated."

Propaganda today is so greatly abused that often it is hardly less than a public menace. Its chief threat is in the half-truths that are presented. Our eyes were opened during the War to the availability of publicity methods that could be used to develop

Proven value in the treatment of Arthritic, Rheumatoid and Neuritic conditions.

A most comprehensive clinical investigation definitely establishes

FARASTAN
(Mono-Iodo-Cinchophen)

as possessing unusual value in the treatment of these often intractable conditions. In addition to giving favorable results in an unusually high percentage of cases FARASTAN is very well tolerated.

May we send you reprint of recent publication and a full size package for clinical test in your practice?

The Laboratories of
THE FARASTAN COMPANY
187 South 11th St.,
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FARASTAN

PAT. OFF.

MONO·IODO·CINCHOPHEN

PATENT APPLIED FOR

To promote the proper peristaltic movement

KELLOGG'S ALL-BRAN has won its favor with the medical profession throughout the country because its use prevents constipation safely.

ALL-BRAN supplies bulk to the system that encourages natural, healthful elimination. Unlike vest-pocket "cures," it does not lead to harmful habits. Compared to part-bran products, ALL-BRAN brings maximum results.

Physicians appreciate ALL-BRAN because it can be enjoyed by patients at any meal. It is a delicious cereal with milk or cream, with fruit or honey added. Sprinkled into soups or used in cooking, its appetizing flavor is always welcome.

Made by Kellogg in Battle Creek, Michigan. Sold by all grocers. Served everywhere. A full-sized package of ALL-BRAN will be mailed free to any doctor upon request.

Kellogg's
ALL-BRAN



either mass opinion or mass reaction. It is not strange that such methods are being employed to exploit the prejudices and weaknesses of human nature.

This is an inexcusable liberty that cannot be justified on the ground that the public is "low brow" and would rather be hoodwinked than be compelled to think. Propaganda cannot and should not be stopped, for some of it is constructive. But it must be reformed by a determined insistence on two things—the whole truth and a clear disclosure of the sources of information.

We talk a great deal about supplying our bodies with a proper diet, but not much is said about a proper diet for our minds. And as a result of this inferiority in the character and quality of current news, we have come to worship physical achievements and almost entirely disregard the value of intellectual accomplishments.

Think of the hundreds of thousands earned in a single hour by a champion pugilist, and compare this to the insignificant rewards given to the men and women who have isolated the germ of sleeping sickness, disclosed the secrets of human glands, invented the X-ray apparatus and discovered insulin. Probably in the long run a scientist like Edison will come closer to attaining immortality than a Dempsey or even a Lindbergh, but no one can deny that in our everyday life, at the present moment, we are far more busy cheering athletes than nurturing and applauding sages.

Notwithstanding our boasted prosperity and our amazing industrial progress, we are still the mute victims of a system that too often hides the truth. That is why science must take a little time from developing mechanical marvels and give attention to purifying the forces now employed in molding and controlling human beliefs and actions.

So it must be plain that we now face problems of paramount importance. No well-wisher of



What Shoe . . . ?

"What shoe will best aid in relieving and correcting many conditions of foot pain, fatigue and even organic troubles resulting from ill-treated feet?"

Obviously it must be a shoe that will comfortably support the weakened foot in proper position. At the same time it must have flexibility to allow the foot to exercise and thus regain normal strength and function. It must conform to the natural shape of the foot, providing ample room for the tread of the foot and the toes.

The Cantilever Shoe fulfills all these requirements. A number of physicians have reported that many patients find instant relief in Cantilever Shoes.

If you wish further information on the corrective features of the Cantilever Shoe, we shall be pleased to furnish you with an informative brochure, "The Feet and Their Relation to Anatomical Disorders." Please write to Cantilever Shoe Corporation, Department J1, 410 Willoughby Ave., Brooklyn, N. Y.

CANTILEVER SHOES

The psychology of C offee in CONVALESCENCE

As every practitioner knows, the mental attitude of the patient is all-important in convalescence. The WILL to get well . . . the fighting spirit . . . these have a tremendous bearing on the progress of the case.

There has been a major operation. Or an accident case. Wherever there has been shock to body or nerves, Coffee has been shown to be beneficial. The steaming fragrance of it . . . the warming cheer of it . . . the mild cardiac stimulation of it, all combine to produce a reaction for good.

Dr. Julius Friedenwald and Dr. John Ruhrah, of the University of Maryland School of Medicine, Baltimore, in their joint work, *Diet in Health and Disease*, frequently include coffee in the breakfast dietaries; and Dr. Torald Sollman, of Western Reserve University, Cleveland, in his *Manual of Pharmacology* says coffee "increases mental and physical efficiency, physical stimulation, comfort and relief from muscular and mental fatigue and from their attendant unpleasant sensations. These effects may be useful in certain conditions, as in those exposed to severe hardship, hunger, fatigue, etc."

We have prepared a leaflet that gives six simple rules for making better Coffee. It is yours for the asking. We would also like to send you the report of an investigation of Coffee, by Prof. Samuel C. Prescott, Director of Biology and Public Health at the Massachusetts Institute of Technology. You may use the coupon for convenience.

BRAZILIAN-AMERICAN COFFEE PROMOTION COMMITTEE
64 Water Street, New York City

Gentlemen: You may send me the Prescott report and the leaflet on better Coffee-making.

Name

Address



good government and fair play for all can fail to recognize the necessity of official supervision that will bring the issue of propaganda into the open by requiring the source to be shown.

There is no other way to protect the masses and prevent a

triumph of the minority over the majority. Our so-called new economic era will certainly fall far short of expectations if we do not succeed in putting an end to practices of the nature of bribery, coercion, falsification and underhanded dealing.



Gone - and Just About Forgotten

Continued from Page 17

minds that was not there twenty-four hours earlier.

A silent and an absent-minded host they are, with no heart whatever for St. Peter's genial welcome.

But one of them, a fat and friendly angel, as he settles his crown with its gleaming stars more firmly over his prematurely bald spot, explodes ruefully, "By golly! I wouldn't have believed it if I hadn't seen it! Only a year, and you'd never know any of us had ever lived on earth.

"I went back to my town and hung around for half a day, to see how my old patients were getting along without me.

"I heard one fellow say 'Doc So-and-so used to have this office, didn't he? Kind of a fat fellow with a funny walk'."

And the doctor who had given his time, his money, the pleasures of life and the companionship of his family, and finally, prematurely, his life—all for the

reward of being remembered as the fat doctor with a funny walk, passed in; while St. Peter, hanging the great key on its pearl headed nail at the side of the gates, said to himself, "Now maybe those boys will get to work and accomplish something around here."

You will notice that the fat angel didn't even mention going to his home. Just as well perhaps. He might have overheard some such conversation as this:

"I'm sure you must miss the Doctor dreadfully, Mrs. So-and-so. He was such a good man."

"Yes, of course I miss him, and the children do, too. But—well—he never was at home with us very much, you know, and—it doesn't seem so different, after all. We always missed him, as far as that's concerned."

Which might have made pleasant listening for the former medical man; and again, might not.

(Turn the Page)

A vegetable tonic Laxative FOR HABITUAL CONSTIPATION

Especially valuable for aged people and those of sedentary habits. They act gently and do not gripe.

Cascara Comp. Tablets
KILLGORE'S

Liberal Sample and Formula on Request

CHARLES KILLGORE

57 West Third Street

New York



*"The Sabine" from the painting
by Louis David in the Louvre
in Paris. A splendid example
of health and vitality.*

In many hospitals and institutions throughout the country, Hires Root Beer is served to those requiring a non-acid beverage, free from drugs and irritating artificial coloring and flavoring.

Root Beer can be made easily from Hires Extract and is most eco-

nomical—a 30c bottle of Hires Extract makes 40 bottles of Root Beer. All one adds is sugar, yeast and water.

For over 50 years Hires Root Beer Extract has maintained its high rank—and 1929 is its greatest sales year so far.

FREE: A sample of Hires Extract for making Root Beer will be sent to any doctor, health officer or nurse, upon request.

The Charles E. Hires Company

Philadelphia, Pa.

If there is such a thing as book-keeping in Heaven, one can imagine those doctors thoughtfully sharpening a fresh quill and making some rather rueful entries after their return from the scene of their earthly labors.

Would the reward for all that they had given up in life be balanced for them, or for any one else, by the findings of their return trip to earth?

Would they have said, "If I could do it all over again, I'd do it in the same way"?

Or, in the light of their acquired wisdom, acquired as wisdom so often is, too late, would they have said instead, "My mistake. The world that God made he could have taken care of without my getting so stewed up about it. It was right to do the best I could, but I guess I put the accent in the wrong place.

"God gave me *my* life to do the best I could with, but I neglected my own affairs, and gave all my attention to the other fellow's problems"!

A practice, by the way, that has been proven a thankless one in every known language.

So that is what I meant by that remark made under cover of the smoke screen. Not that it is possible for a physician to consider in too serious a light the healing of sick bodies and of sick minds; or even that he should look lightly on his own relationship to his chosen life work.

But the loss will eventually be his own, with no adequate compensation for any one else to make it worth while, if he insists on giving small consideration to every obligation except those connected with the practice of his profession.

A balanced life should be as important a desideratum for a physician as a balanced diet for his patients. It should be a life in which he can find some time to devote to his own welfare and happiness, and to becoming—and staying—acquainted with his own family.

Wasn't it Eddie Cantor who

When the Vacation Is Over—

THE "let down" feeling after a strenuous vacation is often a serious handicap rather than a trifle to joke about. Particularly in *delicate individuals*, those with a recognized *constitutional diathesis*, those with *cardiac affections*, the combination of fatigue and the extra effort expected in the Fall so lowers resistance as to noticeably increase susceptibility to respiratory infections or further organic impairment.

In such cases prescribe:

Gray's Glycerine Tonic Comp.

(*Formula Dr. John P. Gray*)

The prompt results will be improved appetite and assimilation, increased vitality, greater resistance to "colds" and their associated troubles.

Samples and literature will be sent to Physicians on request

THE PURDUE FREDERICK CO., 135 Christopher St., N. Y.

Increased Weight

The Addition of Ovaltine to the regular diet may turn the scales.



MANY physicians are finding that with under-nourished, under-weight youngsters, the addition of Ovaltine—the health food-drink—to the regular diet is the one thing needed to get the youngsters' weight and general physical condition on the upward swing.

Ovaltine, rich in growth promoting vitamins and mineral elements, is a bal-

anced food-drink, so palatable that not only the youngsters but the oldsters love it too.

Let's send a regular size package to your home address. Maybe someone in your home needs Ovaltine.

THE WANDER COMPANY, Dept. M.E. 9
186 No. Michigan Avenue,
Chicago, Illinois

Please send me, a regular size can of Ovaltine FREE.

Dr. _____

Home address _____

OVALTINE

told of being admitted to his own home, after one of his customary long absences, by his small daughter who called out after opening the door, "Mamma, here's that man again!"

Funny? Yes. But food for thought just the same.

There are men in the medical profession who have given their lives to research practice, whose names will never die. The profession could not spare them, and humanity has been infinitely blessed by them.

Surely any sacrifice that they have made, and that their families have been called upon to make, has been justified by the work they have accomplished.

But the average practitioner can only follow in the paths these men have blazed. Aren't they paying a price that is not asked of them when they make the same high sacrifice of everything that makes life worth living for the normal man, and for his family?

There are so many of them to "spell" each other. Why would it be disloyalty to their profession for them to realize that, except in emergencies, or under unusual circumstances, the work that any one of them does not do, will not be left undone, but will be taken on by another man, equally efficient?

I know every side of the problem, up and down and all around the corner. For a good many years I have been trying to help solve the question of how at least one doctor can accomplish the seemingly impossible: have his cake and eat it too; how he can have a full and satisfying life as a physician and also as a family man; and how he can earn the respect of his patients as a man of business as well as a man of healing.

I know that illnesses and accidents will never come by rule o' thumb, and that there will always be emergencies to spoil the best laid plans and take the joy out of life for the doctor's family. But any one can put up with an occasional emergency and its effects. It's a steady diet of dis-

If You Want Better Syringe Needle Operation

If you want smooth, dependable, leak-proof operation in your hypodermic work, specify VIM Emerald Syringes and VIM Stainless Steel Needles—because:

- VIM Syringe tips and VIM Stainless Steel Needle mounts fit each other with snug, micrometer accuracy.
- The rustless qualities of VIM Stainless Steel Needles perfectly compliment the tight, velvet-smooth, leak-proof operation of VIM Emerald Syringes.
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Patient complains of foot trouble. Some pain or discomfort along inner side of the foot, perhaps pain up the calf to the knee and lately in the thigh, hip and lumbar region. No objective symptoms.

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This print or "graph" will be sent to you for your own diag-

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Gentlemen: Please send me your literature on Foot Troubles and their Relief.

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appointments that is ruinous to the disposition.

There are just two occasions on which the public takes a physician as seriously as he takes himself. One time is upon occasion of illness, and the other time is upon receipt of the doctor's bill for services rendered.

In between those times, if they think of the doctor at all, it is as: "a good scout, but no business man. A professional man never is."

Well, why isn't he? In no other walk of life is such a state of affairs considered anything to be proud of. And yet, if you'll tell me that the average physician does not seem rather pleased with himself than otherwise when he hears that remark made—well, you'll have an argument on your hands, that's all.

Until the coming of the millennium there will be a deep-rooted conviction in the minds of many people that a doctor's material needs are supplied in some miraculous manner apart from

the payment of his patient's bills. This attitude will never disappear until the medical men themselves decide that having earned an honest living, they intend to collect it—or know the reason why, doing their rightful share of charity, but refusing to be "done" by those who are perfectly able to meet their obligations.

When I say that doctors take themselves too seriously, I am not referring to their financial state of mind. There, as a rule, they do not take matters half seriously enough, but go along blithely unconcerned about things that should be viewed in dead earnest.

And having gone as far as that, they'll be in a fair way to realizing what the fat angel found out in indignation and mortification: that this old world will wag along just as well, whether they are in it, or out of it; and that they might as well take time to look after their own interests and get a little happiness out of life, remembering that they'll be "a long time dead."

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are more convenient to use than the fountain or bulb syringe or the vaginal douche, usually more efficient because the medicaments are brought into closer contact with the affected parts and held there sufficiently long to assure satisfactory effects. These wafers may be used such or powdered or dissolved in water or glycerine.

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shrink pile tissue, stop bleeding, soothe pain.

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Don't Resort to Vaudeville

The wise receptionist knows how to keep a serene office without a continuous performance of tricks

By Marjory B. Griffin

WE receptionists are in a little class all by ourselves and some of us take it very seriously. Woe betide the person who tries to convince me that it does not take a combination of tact and patience to handle a small room very full of people on a hot afternoon.

However small the job, I like to see it well done, and so have perused every magazine and pamphlet that comes my way in search of articles and suggestions on how to keep a pleasant atmosphere in the reception room.

The articles are legion, but are they practical? They are not!

For example: the last one I read (*MEDICAL ECONOMICS*, June, 1929) advised the receptionist to bring in a vase of fresh flowers or a new magazine in the midst of a long wait. If the atmosphere grows tense, the article says, one may move a patient into another room where he may continue to wait, under the impression that he is to see the doctor at once.

These are very good tricks, for tricks they are, no less; but they do not apply to my office. We have three rooms; reception room, the doctor's office, and the treatment room. They are pleasantly furnished, and sufficiently large for our needs, but will not permit a continuous vaudeville performance for the entertainment of our patients.

Were I to bring in fresh flowers, as advised, I should have to fill a vase in the treatment room where the doctor is dressing a wound, let us say. Just where the flowers would repose while

awaiting this performance heaven knows. I don't.

Something tells me that the doctor would not relish my flowery presence while entangled in gauze and adhesive, nor my trotting hither and yon with magazines, opening and closing doors as I went. Indeed, should I pass to and fro as he listened to an infant's diet, I should expect some comment upon my irritating ways.

As for moving a patient into

"To be a good hostess, to be cheerful always, and to retain an atmosphere of friendly helpfulness in the face of many obstacles—this is the goal of every conscientious receptionist."

another room, where would I move him? Into the doctor's office, where the doctor and the patient in process of treatment must presently come, and the outgoing patient must get in his last word as he stumbles over the feet of the waiting one? I think not.

We try to allow ample time between appointments, and usually there are but two or three patients waiting. However, we have that hardy perennial with us always, the patient who "just ran in a minute to ask the doctor something," and remains to ask many questions and retard the progress of our properly sched-

(Turn to Page 101)



IT HAS STOOD THE TEST OF TIME

STAUNCH AND SAFE after carrying the burden of heavy traffic for 46 years, Brooklyn Bridge still stands as a model of suspension bridge architecture. It has outlasted some other bridges of more recent date, in which seemingly immaterial structural defects have culminated in disaster.

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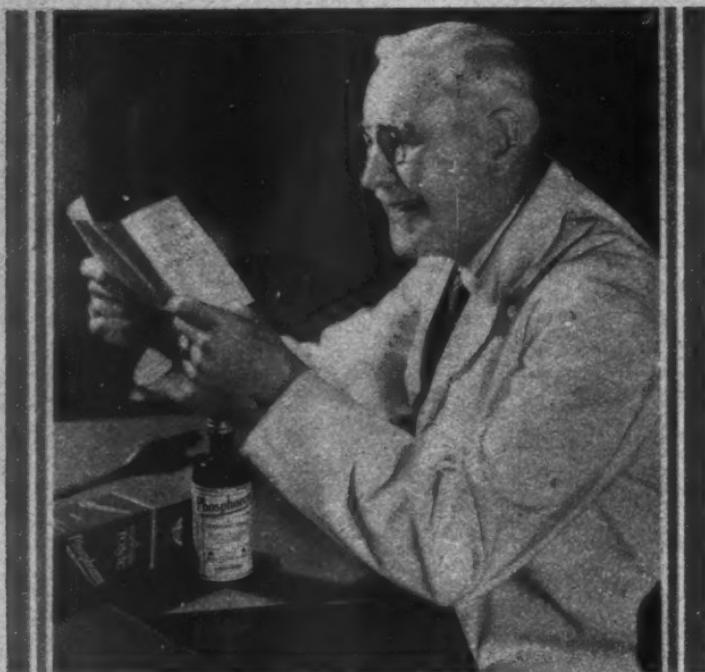


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Around the World The Red Star liner *Belgenland*—westward from New York Dec. 20 for 133 days of glorified sightseeing. 28,000 miles. Numerous optional side trips, including a 12-day cruise through the East Indian Archipelago. Cruise operated jointly by *Red Star Line* and *American Express Co.* \$1750 up, including all expense.

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New Great American Fleet: Three modern steamers plying between New York and California are described in this booklet offered by the Panama Pacific Line, One Broadway, New York.

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California Picture Book: Just what the title suggests. Some of

the photography is beautiful and there are 94 pages of it. From: Santa Fe, 179 W. Jackson Ave., Chicago, Ill.

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Virginia, the Beckoning Land: A thick but interesting folder on a proud and charming state, with a foreword by Governor Byrd. From: Virginia Commission on Conservation and Development, Richmond, Va.

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See Ireland First: A tourist map and descriptive folder issued by the Irish Tourist Association, and available from John Fairman, 200 Fifth Ave., New York.

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For Efficient Vaginal Asepsis

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—the great NEW *Virginia* and *California*. A magnificent new liner, the S. S. *Pennsylvania* (largest steamer ever built under the American flag), enters service in the Fall, sailing from New York October 19 on her maiden voyage. Every modern luxury on these palatial NEW sister ships—only thirteen days coast to coast.

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Round trip, Water and Rail, from home town back to home town again, \$375 (up), First Class; \$275 (up), Tourist; one way, Water, \$275 (up), First Class; \$135 (up), Tourist.



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Seeing the Shenandoah Valley: One of the series of historic folders gotten up by the Baltimore and Ohio Railroad, Baltimore, Md. They are worth writing for.

Atlanta: Much of this season's travel literature is done in modernistic style and this folder is one of the brightest of them all. From: Ward Line, Pier 18, East River, New York.

White Sulphur Springs: America has some famous spas of her own, as the evidence in this booklet shows. For a copy, write to: White Sulphur Springs, Inc., White Sulphur Springs, W. Va.

Europe Calling: A sort of travelers' guide of Europe. Forty-eight pages, illustrated. From: Lifsey Tours, 527 Fifth Avenue, New York.

Orient and Round the World: The conventional style of travel booklet but illustrated in a manner not usually seen. From: Dollar Line, 311 California St., San Francisco, Cal.

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Banff, Lake Louise: The feature of this folder is an enormous map of the United States showing all Canadian Pacific lines and their connections. A couple of pastel paintings add to its beauty. From: Canadian Pacific, Madison Ave. at 44th St., New York.

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Johannesburg: An attractively illustrated booklet giving information on the history, products, and industries of "A Sunshine City Built on Gold." Published by South African Government Bureau, 11 Broadway, New York City.

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The Lure of Latin America: An intriguing booklet about South America with pictures that approach perfection. From: Los Angeles Steamship Co., 780 South Broadway, Los Angeles, Cal.

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May we send you a full-size tube to try, together with recent data and literature? Just mail the coupon.

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Please send me, free of charge, one regular 50-cent size tube of Pepsodent, with literature and formula.

Name..... Degree.....

Address.....

Enclose card or letterhead

Handicap- or Help?

Cont. from Page 37

In speaking of the elder of his preceptors, he relates fondly: "Dr. Sawyer was a real foster father. His fatherly advice and counsel, his all-round efficiency, his very unusual successes, have always been, I think, my one great incentive toward success."

Like many another, he thought his affliction curbed his ambitious plans for life. He would have specialized in surgery but for it.

"I know now that what held me back was merely my lack of self-confidence. If the advice of a man who has been over the road is worth anything to others situated similarly to myself it is this: 'Don't hold back! Do it, whatever your brain and ambition inspires you to do. Succeed in spite of any physical handicap.'"

Professionally speaking the subject of this article has kept well abreast the times. He attends medical meetings frequently, takes post-graduate courses every few years, and feels that he has been well repaid.

As long as a quarter century ago he preached and practiced abstemiousness in diet, winning for himself, before this practice became generally advocated, the reputation among his patients of being a "Food Crank." However those who followed his advice benefited, and he, like others, has lived to see the world vindicate this stand.

Financially speaking he has been "moderately successful," courageous enough to demand that his fees be paid, and justly desirous of enough wealth to pay the way of two to the end.

(Turn the Page)

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Just the thing for writing out prescriptions easily and clearly where desk is not available.

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When calcium given intravenously is desirable as in many cases of tuberculosis (pulmonary, bone and intestinal); in certain cases of asthma and in indolent ulcerous conditions—then

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In this preparation with a greater margin of tolerance, calcium can be administered to about twice the amount per dose possible with calcium in other forms.

Calcium-Glucosan (Breon) is an anhydrous dextrose combined with calcium hydroxide in a definite chemical compound. It is prepared in 30 cc. vials with rubber stoppers. Each vial contains a sterile solution equivalent in calcium content to calcium chloride, 2 grams.

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Send me more information about Calcium-Glucosan (Breon).

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He believes that discouragement comes more often from within than without.

"It has been my personal experience," he said gravely, "that people do not dissuade others who have a fixed goal. Physicians generally have encouraged and helped me, especially in those critical years when I was training my right hand to be an asset rather than a liability."

Sensitive to the natural aversion any abnormality awakens in others, he is very careful not to unnecessarily inflict his upon anyone. People have known him casually for many months and never suspected that he was a victim of such deformity.

He has a way, as one little girl expressed it, "of wearing his hat on his hand."

There have come times when he, like many of his friends, has felt that his talents have been vastly restricted in his small town environment.

The stiffest thing ever put up to him, oddly enough, was of the sort we all face: a moral battle, and his friends tell of its outcome with obvious pride. He resigned his position as local surgeon for a railroad company rather than take what he considered was issue against a dying man. This action is typical of what he gives as the motto of his life:

"To do my level best for all who see fit to use me, and to be just and true."

Knowing that Dr. Downing is an earnest, church-going man, I inquired if he prayed, consciously or subconsciously, when on a losing fight against death. He answered:

"I endeavor with all my soul to make my patient believe in me. I do not forget that God would have all earnest, honest people win victory."

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Gone, too, is that ancient prejudice against cigarettes . . . Progress has been made... We removed the prejudice against cigarettes when we removed harmful irritants from the tobaccos . . .

"It's toasted"

No Throat Irritation-No Cough.

Don't Resort to Vaudeville Continued from Page 84

uled people. Usually he is much surprised and often indignant to receive a statement.

We have also the wily and insistant salesman who makes every effort to insinuate himself into the doctor's office. I have found that our reliable surgical and drug supply men have a regular time to call, usually by special appointment.

Bond salesmen, book agents, etc., are frequently difficult to get rid of, often choosing to sit half an afternoon waiting for a gap between appointments when they may rise, extend the glad hand, and with a toothy smile enter the coveted office.

These are a few of our problems. We have also the noisy, ill behaved child who refuses a pad of scratch paper and pencil with which to amuse himself, who will not sit quietly, but prefers to shuffle the magazines about,

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Requisite in the
General Treatment of

URETHRITIS--CYSTITIS PROSTATITIS

Well Tolerated,
Quickest in Reducing
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Ergoapiol (Smith) is supplied only in
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As a safeguard against imposition, the letters "M. H. S." are embossed on the inner surface of each capsule, thus:

Dose: One or two capsules three or four times a day.

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To prescribe a pleasant and agreeable antacid—one that is prompt and dependable in its results.

No longer is it necessary for your patients to endure the nauseating taste of soda mixtures, if you prescribe

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This pleasant and agreeable acid neutralizer and carminative is put up in tablet form, packed in moisture proof boxes, under a prescription label.

BIS-MINT is indicated in all forms of hyperacidity, flatulence, sick headache, nausea, heartburn, sour stomach and sour eructations. It is

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EFFECTIVE — DEPENDABLE**

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M. D.

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tearing off such covers as appeal to him.

Then there is the foreign patient, difficult to understand and often accompanied by a number of children and relatives. Here in Southern California the Mexican makes up the majority of this class.

Our National Geographic magazines are a great help in entertaining restless children, and we keep a child's size chair for the little tots and a few children's books. Our magazines are new and well kept and we always have a few flowers about.

This I have learned that if the patient is greeted by name he usually responds in an amiable mood. Some people like to be talked with, some do not. It is our business to know which type we are dealing with, but everyone likes to be remembered.

To be a good hostess, to be cheerful always, and to retain an atmosphere of friendly helpfulness in the face of many obstacles, this is the goal of every conscientious receptionist.

Don't Rub!

JUST apply BETUL-OL to the painful area. It penetrates without need of rubbing and quickly RELIEVES CONGESTION in Rheumatism, Neuritis, Sprains, Muscular Stiffness, and whenever a good analgesic is indicated.

The HUXLEY LABORATORIES, Inc.

Successors to ANGLO-AMERICAN PHARMACEUTICAL CORP.
175 VARICK ST NEW YORK

BETUL-OL
The External Analgesic

For Your HAY FEVER PATIENTS

Prescribe
Alkalithia



It will give Relief.
Write us for details.

**KEASBEY & MATTISON
COMPANY**

Ambler Penna.
Pharmaceutical Products
since 1872

Banishing Boils and Styes with STANNOXYL

THE use of metallic tin and tin oxide—Stannoxyl—for boils, styes, pustular acne and other staphylococcal infections has now been established as approved practice in France, England, the United States and many other countries. In this connection, Solis-Cohen and Githens (*Pharmacotherapeutics, Materia Medica and Drug Action*, 1928, p. 722) write as follows:

"French physicians have recently used metallic tin and stannous oxide by mouth, in the treatment of *acne*, *furunculosis* and other staphylococcic infections."

We can cite a number of important publications in English, French, Spanish, Dutch and Czechoslovakian in which authorities have written articles endorsing the use of Stannoxyl. Some of them are quoted in our booklet *Treating Boils without the Lance*, which contains a bibliography on the subject.

However, the actual experience of the thousands of physicians in the field who are using Stannoxyl

is probably the best index of its therapeutic value and also a useful guide to what may be expected of the preparation in the various conditions for which it is indicated.

Early relief, freedom from pain and discomfort, and an excellent cosmetic result are assured.

Dosage: Four to eight tablets daily.

Ethically packaged and advertised only to physicians.

STANNOXYL

Anglo French Drug Co.
(U.S.A.) Inc.

1270 Broadway, New York,
N. Y.

Please send me without obligation pamphlet and a sample package of Stannoxyl Tablets.

M. D.

R easons Why the Doctor Goes Unpaid

Continued from Page 12

payment that are almost sure to occur with anyone dealing with the public.

There are, horrible to say, a few "gold-diggers" among even the supposed ethical of the professions; their exposure shatters the patient's faith in all. Then again the doctor has of necessity to tell a disagreeable truth sometimes and he may unjustly get the reception accorded to messengers who brought news of defeat to ancient despots.

We realize too, that sometimes the doctor, in order to cheer his patient and make him fight for recovery, tells him, "Oh, we'll have you all right in three weeks!" Sometimes this dose of hope, or palliative, is not applied with sufficient discretion and after treatment it is taken as a serious and unfulfilled promise by the sufferer.

The above are briefly the rea-

sions for the very high percentage of delinquency as met by the man in the field who gets a unique opportunity of seeing the physician "as others see him."

What then is the remedy? First I would suggest that, while admittedly it often cannot be done, yet wherever possible, BEFORE the service is rendered, the question of cost should be discussed clearly so that the one responsible may understand.

The average man wants to know what an article or service is going to cost him before buying; yet in the case of sickness, he often has to go ahead blindly hoping to get through somehow.

Once the service has been given, the doctor should be insistent that a definite business-like arrangement be made for payment, even if the wind needs to be tempered for the shorn lamb. The patient will lose no

Systemic Antisepsis

Depraved or toxic conditions of the blood or body tissues met with not only in infectious diseases but in the severe bronchial and gastro intestinal inflammations prevalent in late Summer and early in Autumn, call for the use of

ECHITONE

an active, reliable and effective combination of true Echinacea, Iris and Viola, so gathered and prepared as to supply the true physiological actions of these valuable herbal remedies. Also in Eczema, Psoriasis, Erythema, Acne, Furunculosis, Syphilis and Sepsis.

CYSTO-SEDATIVE

is sedative to the urinary tract, increases urinary elimination, relieves spasm and soothes pain in, CYSTITIS, PROSTATITIS, PROSTATIC ENLARGEMENT, STRANGURY, INCONTINENCE OF URINE, URETHRITIS, acute and chronic.

Samples and literature on request.

STRONG, COBB AND CO., Inc.

Cleveland,

Ohio

Patient Types...

The Rheumatic

Regular and adequate bowel elimination constitutes an essential part of treatment in the majority of patients suffering from the arthritic or gouty diathesis.

The comfortable action of Petrolagar is to be preferred to drastic physic. Petrolagar is pleasing to take and mechanically restores peristalsis without causing irritation and does not upset digestion.

Petrolagar, a palatable emulsion of 65% (by volume) pure mineral oil emulsified with agar-agar, has many advantages over plain mineral oil. It mixes easily with bowel content, supplying unabsorbable moisture with less tendency to leakage. It does not interfere with digestion.

Petrolagar



Petrolagar Laboratories, Inc.,
536 Lake Shore Drive,
Chicago, Ill. Dept. ME-9

Gentlemen:—Send me copy of "HABIT TIME" (of bowel movement) and specimens of Petrolagar.

Dr.

Address.....

confidence in the doctor's professional worth by having respect for his business ability also.

Why not take a leaf from the book of the installment sellers and if a patient cannot pay all cash, make it as easy as possible. Make it easy by having an agreement for a definite sum payable on regular dates? The sellers quote the payment in as small terms as they can: "only a few dollars a week, or a few cents a day." Under this arrangement many a man bites off a big chunk, but having bitten, he proceeds with determination to chew it and succeeds to an astonishing degree.

And so a debt to a doctor that as a lump sum frightens a man into inaction, will be more quickly and cheerfully begun on if he realizes that it can be met a little at a time, if regularly. What a relief it would be to a host of medical and dental men if they know that those accounts now lying dormant on their books would each bring in every month a payment of a specified amount.

The professional man should realize that in this day in the United States, his patients are under a continual bombardment of selling effort. Advertising is every place they turn their eyes and is now even coming from the formerly empty air to assail their ears. Neither in the office nor in the home are they free from the ubiquitous salesman. Even on Sundays they are not safe from invasion.

The family indebtedness to the doctor for services forced on them

WHEN the heart has been weakened from prolonged overwork and strain,

CACTINA PILLETS

*A Preparation of the Mexican
Night Blooming Cereus*

may be safely and effectively prescribed.

Thus employed, Cactina gradually improves the nutrition and tone of the heart muscle, restores the cardiac rhythm and renders the heart more resistant to irritating influences. Cactina is a true cardiac tonic without cumulative effect.

*Samples to Physicians
Only*

Gentlemen:

Please send me a professional sample of
CACTINA PILLETS.

Dr.

Address

Sultan Drug Company
St. Louis, Missouri



Self-rising and easily made into
paintable foods in patient's home.
LISTER BROS., Inc., New York, N. Y.

No taste means no impurities

By disguising the taste or odor of ordinary castor oil the objectionable features are not removed—only covered over. And when the taste of ordinary castor oil, is camouflaged by the addition of benzyl alcohol, saccharin, flavoring or coloring, there is just reason to fear harmful after effects. Such a product is not U.S.P.

There is one safe way to remove the bad taste and odor from castor oil, and that is by the refining process.

That is why you can place full confidence in Kellogg's Tasteless Castor Oil. It is refined by a patented process that renders it absolutely tasteless, odorless, 100% pure and U.S.P. and then is bottled at the refinery . . . which is necessary when quality and purity are desirable. Kellogg's Tasteless is the only refinery-bottled brand on the market. It is never sold in bulk.

Why even consider today old-fashioned castor oil . . . and the distress it causes? It is out-of-date since the advent of Kellogg's Tasteless which is several generations ahead in the field of purity, and odorless and tasteless qualities.

Kellogg's is sold only in the original bottles, 1 oz. (1 dose), 3 oz. and 7oz. sizes. Let us send you a trial bottle free. Use the coupon.

"There is no substitute for purity"

WALTER JANVIER, INC.
121 Varick St.,
New York, N. Y.

M.E.9



Please send me, free of charge, a Convenient Size bottle of Kellogg's Tasteless Castor Oil.

Doctor _____

Address _____

City _____ State _____

by need rather than by choice, and because of lack of prompt billings and definite understanding about settlement, becomes only faintly conscious of the debt. It takes more moral fibre than many people possess to resist the importunities of the skilled and insistent salesman, added to their own hunger for articles which should be, for them, untouched luxuries until their present debt to the doctor is paid.

Numberless families are today oversold. When comes the day of installments calling for fixed sums, certain it is that the doctor's share, of indefinite amount and uncertain due date, is left to the last and consequently forgotten. It is simply put off "until next month" with hope, only to have today's process of postponement repeated again.

I do not suggest that the relation of doctor and patient should ever become as commer-

cialized in spirit as that of seller and buyer, for that would be a decidedly backward step. Personally I would not employ a doctor who seems to have in the foreground of his mind the price of the operation. I should want to feel that my physical need and not his financial one, is his first consideration.

Irregular employment, unusual sickness, serious accidents and some other causes are beyond the doctor's control, but the improvement of the business end of the practice of medicine or dentistry, once the members of those professions are convinced of its vital necessity, should be a matter of only a few years.

When put into effect this will to a great extent offset the effect of the uncontrollable factors and raise materially the financial return for the years of training and years of labor given by the practitioner.



Building an Office in Hollywood

Continued from Page 28

was interested in rapidly developed into a high tower which I found to be twelve stories high, the height limit on buildings in Hollywood. That, thought I, was plenty high to shin down in case of an earthquake.

I inquired again at the Chamber of Commerce for a reputable

insurance firm and found a most courteous reception at the hands of Mr. Lemuel Bailey of the Toberman Co. who assured me that earthquake insurance was for sale at a high premium but that there was very little call for it. Experience had taught that the stress and strain of tremblers



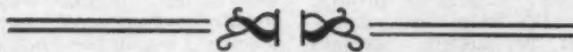
A Bronchial Sedative Expectorant—Vehicle

A Maine Physician Writes:—

"For several years past I have used FITCHMUL extensively in practice and have relied upon it as the best combination I could find."

A. PERLEY FITCH CO.,
Concord, N. H.

The FITCHMUL Formula Canadian Fir Balsam Venice Turpentine Chloric Ether Hydrocyanic Acid (minute quantity) Tartar Emetic Aromatics



The Safe Way

Because it reduces fever temperature slowly, safely and accurately without upsetting the stomach, the emplastrum

Numotizine

(Pneumo-Phthysine)

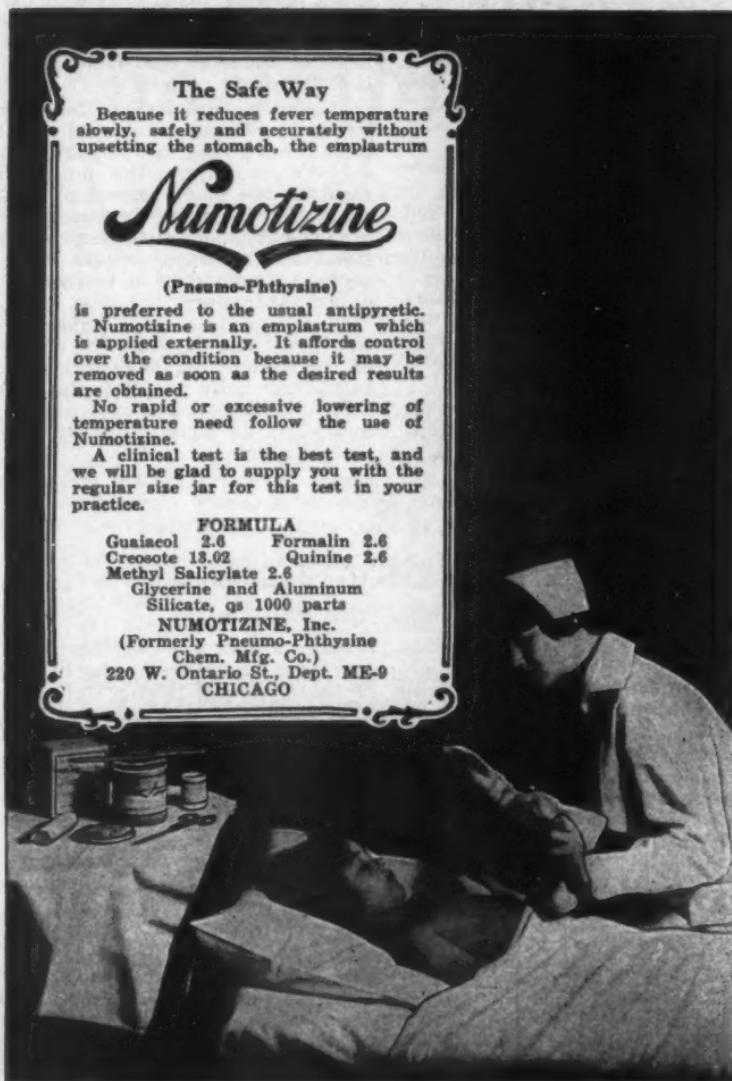
is preferred to the usual antipyretic. Numotizine is an emplastrum which is applied externally. It affords control over the condition because it may be removed as soon as the desired results are obtained.

No rapid or excessive lowering of temperature need follow the use of Numotizine.

A clinical test is the best test, and we will be glad to supply you with the regular size jar for this test in your practice.

FORMULA

Guaiacol	2.6	Formalin	2.6
Creosote	13.02	Quinine	2.6
Methyl Salicylate	2.6		
Glycerine and Aluminum Silicate,	qs 1000 parts		
NUMOTIZINE, Inc.			
(Formerly Pneumo-Phthysine			
Chem. Mfg. Co.)			
220 W. Ontario St., Dept. ME-9			
CHICAGO			



were best combated by steel girder concrete structures.

The question of insurance in general brought to light that burglary insurance was high but that automobile insurance was very low. That there was no demand for cyclone, windstorm or hail insurance. Fire insurance was low with excellent protection and malpractice rates the same as in the east. With all this in mind I decided it was time to pick a potential site for the scene of my daily endeavors.

So I climbed high enough up the girder stairs to get the mountain and ocean view I wanted. The ocean breeze assured me of ventilation and coolness, and the height of the sixth floor a freedom from too much street noise. I found the space I wanted where my door would be next to the elevator and the mail chute.

The stairs were across the hall and the building toilets half way up and down the stairs between floors. The office windows of my space faced to the west and north, and the building was next to an auto park assuring me of space for my patients' cars and my own. A drug store was to be opened in the building and the first floor was to be occupied by the Bank and Safety Vaults. The rental manager was dickering with an x-ray laboratory and a pathologist. On the seventh floor was to be a roof-garden with shrubbery and chairs for tenants of the building and their patients. The professional tenants were limited to ethical doctors and

LIFE-SIZE

COLORED ANATOMICAL CHARTS

Eight Displays, 35 figures in convenient form. Size 42x64 inches.

You will find these charts helpful in explaining diagnosis to your patients. They serve admirably your needs in the laboratory or dissecting room. Revised and augmented by Max Brodel of Johns Hopkins, they are detailed and accurate.

FREE BOOKLET—Our new Froese Booklet (in colors) illustrates all the charts and tells you how others use them. Just pin this adv. to your letterhead and send it along to us for your copy. MMGC

A. J. NYSTROM & CO.
Publishers of Maps, Globes and Charts
3333 Elston Avenue, Chicago

WHEN hepatic secretion is suppressed, in whole or in part, the process of digestion ceases to work smoothly and after a time the sufferer seeks professional advice.

Among the several agents recommended

CHIONIA

*A Preparation of
Chionanthus
Virginica*

has won a position of prominence. It has been in use for so many years that practically the entire profession is acquainted with its value as an hepatic stimulant. Prepared exclusively for Physicians' Prescriptions.

Gentlemen:

Please send me a professional sample of CHIONIA.

Dr.

Address

Peacock Chemical Co.
St. Louis, Mo.

Judged by its results it deserves its success

Professional evidence regarding the efficiency of any therapeutic agent deserves confidence, because physicians of necessity must be critical and discerning in their use of such.

Mineral oil, used alone has given satisfactory results in a certain proportion of cases—not in all.

Mineral oil in combination with other agents, is being offered to the profession.

Magnesia-Mineral Oil (25) HALEY

formerly HALEY'S M-O, Magnesia Oil

has won its deserved success because it is at the same time lubricant, laxative and ANTACID.

In the form of a uniform, permanent, unflavored emulsion of Magma Mag and Mineral Oil it is easily taken, does not disturb digestion and serves, not only in intestinal stasis with consequent constipation and subsequent autotoxemia, but also in oral or gastric or intestinal hyperacidity, gastric or duodenal ulcer, colitis, hemorrhoids. It is useful before and after operation, during pregnancy or maternity, in infancy, childhood or old age. It is an EFFECTIVE ANTACID MOUTH WASH.

Accepted for N.N.R. of the A.M.A.

Each tablespoonful contains:

Milk of Magnesia U.S.P.....	3 fl.
Liq. Petrolatum U.S.P.....	3 fl.

Generous sample and literature to any physician on request. Did you get your copy of R. L. Stevenson's "Eulogy of the Doctor?"



THE HALEY M-O COMPANY, Inc.
GENEVA, N. Y.

dentists—none of the cults and pathies need apply.

When my first and second blueprints came back from the architects I began to perceive that my education had been somewhat heavy on the side of skin-grafts and scar removals and very light on wiring circuits, plumbing stacks and sliding doors. I had long cherished a desire to have an office that would express a sane modernity and not look like a second act set.

When I met a decorator in the person of Harold Grieve, who was willing to lend an understanding ear—(may their tribe increase) to the thought of doing a surgeon's office in modern style and yet old fashioned enough to understand a longing for panelled walls and actually comfortable furniture I felt my burden lighten.

His suggestion of no ceiling lights in the reception room—of wood left in original finish—of matching the drapes—the carpet—the picture frames—the upholstery on the chairs—the lamp shades so that all would harmonize were happy inspirations. When I found that I could replace four of the doors with sliding doors and gain valuable footage—that all doors could be master keyed—and that the reception room door could be wired to sound a far away "bong" when it was opened I began to visualize another day.

The surgery was to have a tiled floor, large size vitreous tile that

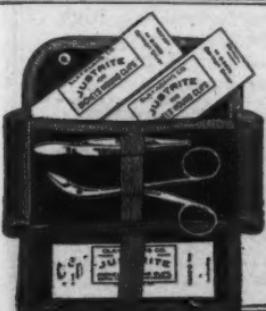
would look clean and could be kept so. The ceiling light was to be a 300 watt globe, and to cut down the glare, the decorator suggested a smooth light olive green paint for the walls and woodwork. My choice of plumbing was a step-on fixture like in the scrub-up rooms at the hospital and a small Frigidaire which supplied cold water by pressing a button in addition to a small cold chamber seemed to complete my wants.

The architect about that time brought up the fact that although I had specified some 30 wall plugs throughout the suite, it would cost me only twelve cents extra to have a double plug wherever I had specified a single one. I had specified in my laboratory workroom a portion of wall space to be used for a projection screen for lantern slides and movie film which quite definitely marked me as having "gone Hollywood."

When I designated certain wall plugs for the janitress' vacuum cleaner to keep her from disconnecting my stand lights there was no doubt of it.

When the joists for the tile in the partitions went up I realized how much I had magnified my blueprint dreams and when the tiles were placed the rooms shrunk daily. The plasterers arrived one afternoon and I started to look for the painters.

The plasterers had worked so fast that I was afraid the painters would be in and out before



The "Justrite" Wound Closure Set

Ask your dealer to show you this handy wound suturing outfit. It consists of a tan canvas case with one each clip-applying forceps, clip removing forceps, and 100 each of three sizes JUSTRITE Michel's Wound Clips. The clips bring the edges of the wound close together, yet pierce superficial skin only, leaving no scars. Should be in every physician's emergency bag. Postpaid price \$6.50 with nickel plated instruments; \$8.00 with chrome plated instruments.

If your dealer cannot supply you, advise dealers name and send order and remittance to

Clay-Adams Co., 117 E. 24th St., New York

A New Way to Treat Gastric Hyperacidity

Acid Adsorption

vs.

*Chemical
Neutralization*

*Form this acid
adsorbing gel
in the stomachs
of your hyperacid cases*



ALUCOL

(COLLOIDAL HYDROXIDE OF ALUMINUM)

THE introduction of ALUCOL—a true colloidal type of hydroxide of aluminum—by the Wander Research and Chemical Laboratories marks a new advance in the treatment of gastric hyperacidity.

ALUCOL acts by colloid-chemical adsorption, not by chemical neutralization. It combines *colloidally* with the excess of gastric HCL to form a colloidal gel in the stomach. This gel acts as a

carrier of the excess of acid and removes it from the system.

As ALUCOL does not neutralize the acid, it does not hinder or prevent proteolytic activity.

Clinical reports show ALUCOL to be remarkably effective in gastric and duodenal ulcer and other conditions characterized by high gastric acidity.

Alucol is issued in tablet and powder form.

THE WANDER COMPANY,
180 No. Michigan Ave.,
Chicago, Ill. Dept. M.E. 9

Please send me, without obligation, a container of ALUCOL for clinical test, and brochure on "The New Colloidal Ant-acid."

Dr.

Address

The Wander Company

180 North Michigan Avenue

Chicago, Illinois

I could really get over some ideas I had on color. Well, as the days and weeks went on, while waiting for the California climate to dry that plaster, the painters and I got to be such good friends that I saw a half dozen other jobs before mine was ready.

We finally, to dry the plaster, built a vestal fire in each room, which I inspected nightly to see that it was lighted.

It seemed as if the climate was just as unusual on the outside as the inside when we started to install the "Kiln dried" panelling. You will notice the use of the pronoun "we"—it is not an editorial one, for by this time I was at least entitled to a union card if not carrying one.

By the time the hardware and locks were called for it was discovered they were still at the factory down east. That little omission was made up in radiators which I found hung around Christmas-tree-style one morning.

Some good salesman had sold the building the necessary number

computed evidently from statistics furnished by the Norge survivors and priced to sell by the pound. At present I find three of the smallest wall radiators more than enough for the entire six rooms. The telephone company about that time evinced a dislike for the interoffice phone system which I was having installed by an independent firm.

The office was besieged daily by carpet-baggers, each one with a bag full of carpet samples. Finally came the day of the opening. I found a neighboring florist who agreed to furnish a little nosegay for the reception room and my private office twice a week at a price so low as to be absurd. My announcement cards brought many friends and fellow doctors, the universal comment being "what a swell racket this must be"; "how nice of the building to fix an office like this for you!"

The doctors and dentists of Hollywood turned out to be a most acceptable group. Most of

Spunoint

for Sunburn, Windburn

Immediate Relief for Irritated Skin

Easy to Apply and Without Pain

Free Sample for Doctors

THE LYNDON CHEMICAL CO.

Dayton, Ohio



When you visit your dealer---

—Ask to see the various articles of equipment manufactured by the firms listed below. Whether you intend to buy immediately or in the future it will pay you to keep in touch with the new trends which are developed to help you maintain "a well-equipped office."

Furniture

Allison Office Furniture
W. D. Allison Co.,
Indianapolis, Ind.

American Metal Furniture
American Metal Furniture Co.,
Indianapolis, Ind.

Sterilizer

Castle Sterilizers
Wilmot Castle Co., Rochester, N. Y.
(See Page 3)

Pelton Sterilizer
The Pelton & Crane Co.,
Detroit, Mich. (See Page 46)

Specialists' Office Outfits

Sorensen Diagnostic Treatment Cabinets
C. M. Sorensen Co.,
Long Island City, N. Y.

Miscellaneous

Schellberg Colonic Therapy Apparatus
Schellberg Mfg. Corp.,
New York City (See Page 61)

X-Ray Equipment

Engeln
Engeln Electric Co.,
Cleveland, Ohio

Victor
Victor X-Ray Corp.,
Chicago, Ill. (See Page 42)

Wappler
Wappler Electric Co.,
Long Island City, N. Y.

Physiotherapy Equipment

Engeln
Engeln Electric Co.,
Cleveland, Ohio

Eveready Sunshine Lamp
National Carbon Co.,
Cleveland, Ohio (See Page 50)

Hanovia Alpine Sun Lamps
Hanovia Chemical & Mfg. Co.,
Newark, N. J. (See Page 50)

McIntosh Diathermy
McIntosh Electrical Corporation,
Chicago, Ill.

Victor
Victor X-Ray Corp., Chicago, Ill.
(See Page 42)

Wappler
Wappler Electric Co.,
Long Island City, N. Y.

"A Well-Equipped Office Is a Sound Investment"

them came from the East and had learned like myself the value of a friendly and understanding relationship between one another. This was cemented by the attitude of the Hollywood Hospital who welcome to their open "courtesy staff" new doctors who can furnish the proper credentials.

An entirely workable and delightful medical society exists in the Hollywood Academy of Medicine which meets monthly the year around. The meetings are preceded by a dinner, and a spirit of informality and genuine welcome exists, as exemplified by the jovial secretary Dr. J. M. Klein, to a degree which makes every member a plugger.

The fact that a medical society of 150 members, such as the Hollywood Academy of Medicine, has a much higher average attendance than the Los Angeles County Medical Association of 1800 members speaks for itself.

I found also a Medical Telephone exchange which operated on a switchboard plan. The telephone directory lists under each number the line "if no answer call" giving the same number. When a member's phone rings three times or over, the switchboard plugs in anytime during the twenty-four hours.

A year has gone by. Before I came to Hollywood I was told that the desert was black with doctors walking home from California. New office buildings continue to rise, new people and old patients from the east continue to arrive and the building problems of yesterday are submerging in the sea of practice.

I have just had a pessimistic colleague read this article in hopes of inspiring his comment for an appropriate ending. His

suggestion was to remind me of the man who, falling from a twentieth story window was heard to say as he passed the fifth floor, "all's well so far!"

ANGOSTURA

DR. SIEGERT'S

(Elix. Ang. Amari Sgt.)

The familiar flavor powerfully masks unpleasant drugs—tones appetite and metabolism. Elix. Ang. Amari Sgt.—q.s.

Send for Sample

J. W. WUPPERMANN

Promotion Department

14 East 46th Street, New York, N. Y.

Vera Perles of Sandalwood Compound

FOR treatment of subacute and chronic inflammation of the mucous membranes, especially of the urinary tract, Vera Perles of Sandalwood Compound have been found effective. Two Perles, with or after every meal, as directed, constitute the usual dosage.

CONTAINING

East India Sandalwood Oil	0.0616 c.c.
Hairism Oil	0.1848 c.c.
Copalba Oil	0.0616 c.c.

A generous sample for clinical trial will be sent upon receipt of your request.

THE
PAUL PLESSNER CO.
Detroit, Mich.

THE IDEAL TAMPON

Made of soft wool, pessary shaped, compounded with various formulae for the treatment of Cervical and Vaginal disorders. Easily inserted. Effective in many cases where douches and suppositories are impractical. Write for descriptions and prices. C. B. Moyer & Co., 140 N. Eleventh Street, Philadelphia, Pa.

The Standard Effervescent Saline since 1895



SINCE 1895 Sal

Hepatica has been the approved laxative and cathartic for flushing the intestinal tract and for promoting internal purification, without creating a condition of tolerance.

It is also the ideal treatment to alkalize the system. It is efficient, palatable, reliable and a preparation that the practitioner can well recommend.

(Samples for clinical purposes)

BRISTOL-MYERS CO., 75 M West Street, N.Y.C.

Sal Hepatica

"The Saturated Saline Laxative"

OCCY-CRYSTINE Therapeutically Correct



THE UNUSUAL FLUID BULK:

Due to the hydragogue action of OCCY-CRYSTINE, dilates the bowel wall, insures a positive cleansing of the entire intestinal tract, and accelerates the emptying of the bile passages.

Liberal clinical trial supply on request.

OCCY-CRYSTINE CORPORATION
P. O. Box 118 Grand Central Station
New York, N. Y.

OCCY-CRYSTINE CORP.
New York.

Gentlemen:—Please send me postage prepaid a clinical trial supply of OCCY-CRYSTINE.

Name _____

Address _____

M.E. _____

Laboratory,
Salisbury, Conn.

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A Printer's Error

Reported by Lawyer Hayward

THE Alabama doctor had ordered some note forms from the local printer, and, according to the copy which the doctor furnished, the body of the note was to contain a proviso that all the parties to the note waived presentment, notice and protest, and consented to be sued in the county where the doctor lived, moved and earned his daily bread and a small pat of butter.

"Some of these notes will be endorsed, so you can print the same clause on the back of the note," the doctor ordered, but when the printed notes were delivered, everything was in proper order except that the proviso on the back contained no reference to suit being brought in that particular county.

"I don't see what harm it will do, for the face of the note says that 'all parties' agree to be sued in my county," the doctor assured himself, took a note from A, endorsed by B; and then on the strength of the waiver in the note, sued B in the doctor's county, which he would not be entitled to do if the note had been in the ordinary form.

"The proviso in the body of the note binds all parties, which is broad enough to cover the endorsement," the doctor argued.

"The unusual stipulation or condition as to the place of suit, will not be supplied by implication to the express provisions, conditions or limitations of the agreement by the written endorsement of B," the Alabama courts said, in ruling against the doctor's contention.

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